

Declaration of Citizenship or Immigration Status

Instructions: Complete this form for all family members. Adults age 18 and over must sign their own portion of the form. A parent or legal guardian must sign for children under the age of 18 years.

Print Name of Household Member	Select the appropriate box:	Signature:	Date:
Head of Household (print name):	<p> <input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status. </p>	<p>Signature of the Head of the Household</p>	<p>Date</p>
Household Member #2 (print name):	<p> <input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status. </p>	<p>Is this household member age 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, the member must sign below. If NO, the parent or guardian of the member must sign below.</p> <p>Signature</p>	<p>Date</p>
Household Member #3 (print name):	<p> <input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status. </p>	<p>Is this household member age 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, the member must sign below. If NO, the parent or guardian of the member must sign below.</p> <p>Signature</p>	<p>Date</p>
Household Member #4 (print name):	<p> <input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status. </p>	<p>Is this household member age 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, the member must sign below. If NO, the parent or guardian of the member must sign below.</p> <p>Signature</p>	<p>Date</p>

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Instructions: Complete this form for all family members. Adults age 18 and over must sign their own portion of the form. A parent or legal guardian must sign for children under the age of 18 years.

Print Name of Household Member	Select the appropriate box:	Signature:	Date:
Household Member #5 (print name):	<input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status.	Is this household member age 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, the member must sign below. If NO, the parent or guardian of the member must sign below. Signature	Date
Household Member #6 (print name):	<input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status.	Is this household member age 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, the member must sign below. If NO, the parent or guardian of the member must sign below. Signature	Date
Household Member #7 (print name):	<input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status.	Is this household member age 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, the member must sign below. If NO, the parent or guardian of the member must sign below. Signature	Date
Household Member #8 (print name):	<input type="radio"/> A citizen of the United States <input type="radio"/> A non-citizen with eligible immigration status. I understand I must provide documentation of the eligible status for this family member. is <input type="radio"/> Choosing not to certify that he or she is a citizen or has eligible immigration status. I understand that this may affect the amount of housing assistance that my family will receive. <input type="radio"/> A non-citizen with no eligible immigration status.	Is this household member age 18 years or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, the member must sign below. If NO, the parent or guardian of the member must sign below. Signature	Date

If your household has more than 8 people, please make a copy of this sheet to list the additional members.

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