



**Eden Village of Kansas City
CASE MANAGER CERTIFICATION**

Name of person being verified as homeless _____

I understand that third party verification is the preferred method of certifying chronic homelessness for an individual who is applying for housing. I understand self-declaration is only permitted when I have attempted but cannot obtain third party verification.

Documentation of attempt made for third party verification:

Case Manager Name _____

Case Manager Signature _____ Date ____/____/____