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| HEAD OF HOUSEHOLD NAME | SOCIAL SECURITY NUMBER (last 4 digits) |
|------------------------|--|

**FORM 12. REQUEST TO ADD A HOUSEHOLD MEMBER**

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| Complete this form to declare any additions to your household by birth, adoption, marriage, or domestic partnership or if you would like to request that any other individuals be added to your household. All proposed additions to household age 18 and over will be screened for criminal background and sex offender registration. <b>Failure to get approval from HPD for all proposed additions other than by birth, adoption, marriage or domestic partnership may be cause for the termination of Rental Subsidy assistance.</b><br><br><b>TO BE COMPLETED AND SIGNED BY THE HEAD OF HOUSEHOLD AND PROPOSED MEMBER</b> | <b>Have you completed this form?</b>   |   |
|  | <b>Yes</b><br><input type="checkbox"/> | <b>Not Applicable</b><br><input type="checkbox"/> |

Required for all proposed household members **18 years of age and older**:

- A photo ID, Social Security card and birth certificate
- Proof of prior address
- A signed "Authorization for the Release of Information" (Form 1)
- A Signed "Declaration of Employment Status Form" (Form 2)
- Documentation of any income received by the proposed household member

Required for all proposed household members **under 18 years of age**:

- Legal custody documents or a letter from a social service provider stating the child permanently resides with the Head of Household
- A copy of Social Security card
- A copy of birth certificate
- "Verification of Absent Parent(s)" (Form 9) (if applicable)

|  |            |                                   |                        |
|--|------------|-----------------------------------|------------------------|
| LAST NAME  | FIRST NAME | RELATIONSHIP TO HEAD OF HOUSEHOLD | SOCIAL SECURITY NUMBER |
| _____ / _____ / _____ Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <b>Are you disabled?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Are you a student?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No<br>BIRTH DATE  |            |                                   |                        |
| <b>Are you employed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, please complete "Verification of Wages" (Form 4). If NO, complete "Declaration of All Income" (Form 3).  |            |                                   |                        |
| <b>Declaration of Citizenship Status</b> <input type="checkbox"/> Citizen <input type="checkbox"/> Non-citizen with Eligible Immigration Status <input type="checkbox"/> Non-citizen who chooses not to declare Eligible Immigration Status  |            |                                   |                        |
| <b>If your status is "Citizen" you must provide documentation if "Non-citizen with Eligible Immigration Status," you must include one of the following documents:</b> 1) Alien Registration Card (Form I-551), 2) Arrival Departure Record (I-94), 3) Temporary Resident Card (I688), or Employment Authorization Card (I-688B). <b>If "non-citizen who chooses not to declare"</b> household subsidy will be based on the number of eligible citizens and legal residents in the household. |            |                                   |                        |

I certify that the above information is accurate and understand that providing false statements to a government agency is punishable under federal law and may result in loss of subsidy.

|   |               |
|---|---------------|
| _____<br>SIGNATURE OF PROPOSED HOUSEHOLD MEMBER OR GUARDIAN (IF UNDER 18) | _____<br>DATE |
| _____<br>SIGNATURE OF HEAD OF HOUSEHOLD                                   | _____<br>DATE |