



# Shelter Interruption Statement

Date \_\_\_\_\_

TAO \_\_\_\_\_

EA AU Name \_\_\_\_\_

SSN \_\_\_\_\_

I and my family will leave \_\_\_\_\_  
Shelter Name

on \_\_\_\_\_ and we will move temporarily to:  
Date

\_\_\_\_\_  
Street Address City

We are moving:

With relatives \_\_\_\_\_  
Name

How many people live there now? \_\_\_\_\_ Is it private  public  or subsidized  housing?

With friends \_\_\_\_\_  
Name

How many people live there now? \_\_\_\_\_ Is it private  public  or subsidized  housing?

Other, such as a domestic violence shelter placement, substance abuse treatment program

\_\_\_\_\_  
Name

Additional statement to describe the need to leave current shelter placement

\_\_\_\_\_  
\_\_\_\_\_

We will be returning on \_\_\_\_\_  
Date

### Recipient Signature

\_\_\_\_\_

Your move from an EA shelter placement is approved.

Your move from an EA shelter placement is not approved.

\_\_\_\_\_  
AU Manager/Homeless Coordinator Signature

\_\_\_\_\_  
Supervisor Signature

Original to EA AU - Copy to AU Record