



**Nevada Ryan White Parts ABCD  
Common Guidance Document  
Non-Stable Housing Declaration Form**

Date: \_\_\_\_\_

Client Name \_\_\_\_\_ DOB: \_\_\_\_\_

I declare that I meet one of the following conditions of non-stable housing to fulfill the Common Guidance for Ryan White Parts ABCD eligibility requirement for residency:

- Live in a motel, hotel, or weekly rate housing paid for with or without emergency vouchers
- Live in a shelter (family, domestic violence, youth shelter, or transitional living program)
- Temporary arrangement to stay or live with family or friends
- Temporary housing using Ryan White Program or HOPWA subsidies
- Temporary institutional placement (hospital, psychiatric hospital, treatment center, detox facility)
- Live in an abandoned building, in a car, campground, or on the street
- Other: \_\_\_\_\_

Last known address: \_\_\_\_\_

General area and zip code of where the client resides: \_\_\_\_\_

I hereby declare that the above information regarding my current living situation is true.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date