

Dear Applicant:

The Housing Authority's Admissions and Occupancy Policy states that preference for admission to the Housing Authority of the City of Frederick shall be given to applicants as follows:

- First:** Head of household and/or any co-head is employed as defined below, is age 62 or older, or is receiving any payments based on the individual's inability to work; family is homeless by definition below; or family is displaced for reasons defined below.
- Second:** Applicant lives or works in Frederick City or County.
- Third:** Head of household or spouse is disabled veteran.
- Fourth:** Other veterans or servicemen and their families.

Preference Definitions

- Displaced:** Includes displacement by fire or natural disaster or by government action. An applicant qualifies for this preference if they have been involuntarily displaced and are not living in standard replacement housing, or if they will be involuntarily displaced within six months.
- Employed:** Working an average of at least thirty (30) hours per week for six (6) months prior to being housed;
Working an average of twenty (20) hours per week for six (6) months prior to being housed and actively participating in attending college or instructional program of professional or career development on at least a half-time basis for two (2) consecutive semesters; also included in this definition one (1) gap in employment of no more than twelve (12) weeks for a verified medical reason shall not disqualify applicant who is currently receiving unemployment payments after having been employed on a continuous basis for at least one (1) year.
- Homeless:** A homeless family is defined as any person or family that has a primary night time residence that is a supervised publicly or privately operated shelter (includes transitional housing) or currently resides in a hotel/motel in Frederick City or County for a minimum of thirty (30) days.

Preference points for each ranking category will be aggregated to determine the applicant's place on the waiting list.

In order that your application may be properly ranked on the waiting list, please complete the attached form, to be placed on file with your application. Your signature on the form certifies the information to be true and correct for ranking purposes. You will be required to verify the information prior to being admitted as a resident.

PREFERENCE CERTIFICATION FORM

NAME: _____

ADDRESS: _____

I certify that my household qualifies for the preferences for admission to public housing checked below:

- _____ **1. Head of household and/or co-head is:**
 - working an average of at least thirty (30) hours per week for six (6) months prior to being housed.
 - working an average of twenty (20) hours per week for six (6) months prior to being housed and actively participating in attending college or instructional program of professional or career development on at least a half-time basis for two (2) consecutive semesters.
 - receiving unemployment payments after having been employed on a continuous basis for at least one (1) year.

- _____ **2. Head of household and/or any co-head is age 62 or older or is receiving any payments based on the individual's inability to work.**

- _____ **3. I am homeless (have a primary night time residence that is supervised publicly or privately operated shelter or transitional housing or currently resides in a hotel/motel in Frederick City or county for a minimum of thirty (30) days.)**

- _____ **4. I am displaced by fire or natural disaster or by government action.**

- _____ **5. I live and/or work in Frederick City or County.**

- _____ **6. Head of household or spouse is a disabled veteran.**

- _____ **7. Other veterans or servicemen and their families.**

Signature

Date