## **KANSAS HOUSING**

## **EMERGENCY SOLUTIONS GRANT**

## STAFF AFFIDAVIT OF ELIGIBILITY FOR ESG

## Purpose: This form serves as documentation that:

Head of Household Name:

- 1. The program participant(s) named below meets all eligibility criteria for ESG assistance
- 2. This eligibility determination is based on true and complete information
- 3. Neither the staff member making this determination nor his or her supervisor are related to the program participant through family, business or other personal ties; and
- 4. This eligibility has not resulted from, nor will result in, any financial benefit to the staff member making this determination, his or her supervisor, or anyone related to them.

Instruction: This form must be completed for each program participant upon the determination of his or eligibility for ESG assistance. This form must be signed and dated by the ESG staff person who makes this determination and that person's supervisor and kept in the program participant's case file. This form will remain valid, unless a different staff person re-determines the program participant's eligibility, at which time a new affidavit is required.

**Names of Other Household Members:	
**All members in the household that will benefit t	from FSG assistance should be listed
All members in the nousehold that will belieff t	Tom 200 assistance should be listed.
Required Certifications: Each person signing be	
	participant named above meets all requirements to receive
assistance under the ESG program; 2. To the best of my knowledge and abilit	ty, all of the information used in making this eligibility
determination is true and complete;	ly, all of the information used in making this eligibility
	nrough family, business or other personal ties;
4. To the best of my knowledge, neither I no	or anyone related to me has received or will receive any
financial benefit for this eligibility determination;	
	e Department of Housing and Urban Development, Office of
and 18 U.S.C. 641;	Federal laws to include, but not limited to 18 U.S.C. 1001
·	ns is found to be false, I will be subject to criminal, civil and
administrative penalties and sanctions.	
ESG Staff Signature:	Date:
ESG Supervisor Signature:	Date: