

**RIHousing HOME Program**  
**Certification of Domestic Violence, Dating Violence, Sexual Assault or Stalking**

The Violence Against Women Act (VAWA). VAWA provides protections for victims of domestic violence, dating violence, sexual assault, or stalking. VAWA protections are not only available to women, but are available equally to all individuals regardless of sex, gender identity, or sexual orientation.

The protections provided under VAWA are summarized in a separate notice. If you are seeking VAWA protections from your housing provider, the housing provider may request you to submit documentation about the incident or incidents of domestic violence, dating violence, sexual assault, or stalking. In response to this request, you or someone on your behalf may complete **this form** and submit it to your Housing Provider, **OR** you may submit one of the following types of third-party documentation:

- A record of a Federal, State, tribal, territorial, or local law enforcement agency, court, or administrative agency that documents the incident;
- A signed statement by you and an employee, agent, or volunteer of a victim service provider, an attorney, a medical professional or a mental health professional (collectively, “professional”) from whom you sought assistance; or
- Any other statement or evidence that the Housing Provider has agreed to accept.

From the date that you receive a written request from your housing provider to provide documentation of the occurrence of domestic violence, dating violence, sexual assault, or stalking, you will have 14 business days to submit documentation, unless your housing provider extends the time to submit the documentation. If the requested information is not received within the time allowed, your housing provider does not need to grant you any VAWA protections.

**Confidentiality:** The Housing Provider, and any of its employees, contractors or agents, must keep confidential any information you provide related to the exercise of your rights under VAWA, including the fact that you are exercising your rights under VAWA. The Housing Provider must not enter your information into any shared database, provide access to, or disclose your information to any other entity or individual, unless you give written permission, the Housing Provider needs to use the information in an eviction or termination proceeding, or a law requires the Housing Provider to release the information.

**TO BE COMPLETED BY OR ON BEHALF OF THE VICTIM OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING**

1. Date the written request is received by victim: \_\_\_\_\_

2. Name of victim: \_\_\_\_\_

3. Your name (if different from victim's): \_\_\_\_\_

4. Name(s) of other family member(s) listed on the lease: \_\_\_\_\_

\_\_\_\_\_

5. Residence of victim: \_\_\_\_\_

6. Name of the accused perpetrator (if known and can be safely disclosed): \_\_\_\_\_

\_\_\_\_\_

7. Relationship of the accused perpetrator to the victim: \_\_\_\_\_

8. Date(s) and times(s) of incident(s) (if known): \_\_\_\_\_

\_\_\_\_\_

10. Location of incident(s): \_\_\_\_\_

In your own words, briefly describe the incident(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This is to certify that the information provided on this form is true and correct to the best of my knowledge and recollection, and that the individual named above in Item 2 is or has been a victim of domestic violence, dating violence, sexual assault, or stalking. I acknowledge that submission of false information could jeopardize program eligibility and could be the basis for denial of admission, termination of assistance, or eviction.

Signature \_\_\_\_\_ Signed on (Date) \_\_\_\_\_