

CHANGE OF STATUS FORM (Household Composition)

Please print in ink. Additional persons added to the household and removals from the household must be reported within 10 business days. Failure to report changes may result in termination of housing assistance.

ALL TENANTS- PLEASE FILL OUT THIS PORTION:

Head of Household:

First Name	Middle Initial	Last Name	Home Telephone Number
Street Address	City	State	Zip Code
			Work Telephone Number

ONLY FILL OUT THIS PORTION IF YOU ARE ADDING AN INDIVIDUAL TO YOUR HOUSEHOLD:

*For each additional member you must attach a copy of his or her birth certificate and social security card. Note: A criminal background investigation will be performed for individual's age 18 and older. (The family must inform the Housing Authority in writing of the birth, adoption or court ordered custody of a child. The family must request the Housing Authority's approval to add any other household member as an occupant of the unit.)

New Person Information:

First Name	Middle Initial	Last Name
Previous Address	Social Security Number	
Date of Birth	Relationship to you	Sex

ONLY FILL OUT THIS PORTION IF YOU ARE REMOVING AN INDIVIDUAL FROM YOUR HOUSEHOLD:

Person to remove:

First Name	Middle Initial	Last Name
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Reason for removing the individual:

When adding a person to your household NOTE:

DO NOT ADD ANYONE TO YOUR HOUSEHOLD UNTIL THE RALEIGH HOUSING AUTHORITY HAS APPROVED IT.

The family must promptly inform the Raleigh Housing Authority of the birth, adoption or court-awarded custody of a child. The family must request Raleigh Housing Authority approval to add any other family member as an occupant of the unit.

Only members of the assisted family may reside in the unit.

(Except for a foster child or a live-in aide)

IMPORTANT INFORMATION

If the individual is under the age of 18, please attach copies of:

- Legal documentation from the court system or from the North Carolina Legal system showing that you have legal guardian ship if not your child/children.
- Social Security Card
- Birth Certificate (Mothers copy is acceptable if adding a newborn)
- Proof of any income received for this person (Child Support, SSI, AFDC)
- Citizenship form (See Receptionist)

If the individual is over 18, please attach copies of:

- Social Security Card
- Birth Certificate
- Proof of any Income (Wages, SSI, SS, AFDC etc.)
- Citizenship Form (See Receptionist)
- Authorization for Release of Information must be completed (See Receptionist)

*Raleigh Housing Authority will conduct a criminal background check on individuals 18 years of age or older.

If the individual has engaged in any of the criminal activities listed below, they will not be allowed to move into your unit

1. Misdemeanor within the last 3 years
2. Felony within the last 5 years

WARNING: Section 1001 of the Title 18 of the United States Code (Criminal Code and Criminal Procedure, 72 Stat.967) applies to this certification. 18 U.S.C. 1001, among other things, provides that whoever knowingly and willfully makes or uses a document or writing knowing the same to contain any false, fictitious or fraudulent statement or entry, in any matter within jurisdiction of any department or agency of the United States, shall be fined no more than \$10,000 or imprisoned for not more than five years, or both.

I hereby give Raleigh Housing Authority permission to request and obtain information required to perform a change based upon the information provided by me, which is listed above and /or attached.

Tenant's Signature _____ Date _____