

## SELF-CERTIFICATION FORM FOR CHDO BOARD MEMBERS

|                            |
|----------------------------|
| <b>Name:</b>               |
| <b>Address:</b>            |
| <b>City/State/Zip:</b>     |
| <b>Email Address:</b>      |
| <b>Organization's Name</b> |

Check the **ONE** box that defines your status on the organization's Board of Trustees. Be sure to fill in the required information in the grayed blocks.

**Public Official or Employee**

I am an elected or appointed public official.

*Elected or appointed representatives **cannot** be qualified as low-income representatives, even if they meet the qualifying criteria*

**Member of a Low-Income Household**

I am a member of a household of ( ) people. Our combined total expected income for a household of this size for 2013 is less than 80% of the area median income in the county in which I live.

- A third party verification of my income is attached (i.e. copy of taxes, letter from school district indicting free lunch status, etc.)

**Resident of Low Income Area**

I reside in census tract number ( ), which according to the 2010 Census has more than 50% of its households with incomes less than 80% of the area median income.

- A third party address verification is attached (i.e. utility bill, driver license, etc.)

**Elected Representative of Low-Income Group**

I am elected by the membership of an organization whose membership is open to all residents of a **DEFINED NEIGHBORHOOD** in which the 2010 census shows that more than 50% of the households have incomes less than 80% of the area median income, and I serve primarily as a representative of that neighborhood group.

The group's name is ( )

The census tracts served by the group are ( )

- A letter from this organization indicating that I am its representative is attached.

I am not an elected or appointed public official and I am not a representative of the low income community as defined above.

Signature of Board Member \_\_\_\_\_

Date \_\_\_\_\_