CERTIFICATION OF  U.S. Department of Housing  
DOMESTIC VIOLENCE,  and Urban Development  
OMB Approval No. 2577-0286  
DATING VIOLENCE,  Exp. 06/30/2017  
SEXUAL ASSAULT, OR STALKING,  
AND ALTERNATE DOCUMENTATION

Purpose of Form: The Violence Against Women Act (“VAWA”) protects applicants, tenants, and  
program participants in certain HUD programs from being evicted, denied housing assistance, or  
terminated from housing assistance based on acts of domestic violence, dating violence, sexual assault, or  
stalking against them. Despite the name of this law, VAWA protection is available to victims of domestic  
violence, dating violence, sexual assault, and stalking, regardless of sex, gender identity, or sexual  
orientation.

Use of This Optional Form: If you are seeking VAWA protections from your housing provider, your  
housing provider may give you a written request that asks 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 optional form and submit it  
to your housing provider, or you may submit one of the following types of third-party documentation:

(1) A document signed by you and an employee, agent, or volunteer of a victim service provider, an  
attorney, or medical professional, or a mental health professional (collectively, “professional”) from  
whom you have sought assistance relating to domestic violence, dating violence, sexual assault, or  
stalking, or the effects of abuse. The document must specify, under penalty of perjury, that the  
professional believes the incident or incidents of domestic violence, dating violence, sexual assault, or  
stalking occurred and meet the definition of “domestic violence,” “dating violence,” “sexual assault,” or  

(2) A record of a Federal, State, tribal, territorial or local law enforcement agency, court, or  
administrative agency; or

(3) At the discretion of the housing provider, a statement or other evidence provided by the applicant or  
tenant.

Submission of Documentation: The time period to submit documentation is 14 business days from the  
date that you receive a written request from your housing provider asking that you provide documentation  
of the occurrence of domestic violence, dating violence, sexual assault, or stalking. Your housing  
provider may, but is not required to, extend the time period to submit the documentation, if you request an  
extension of the time period. If the requested information is not received within 14 business days of when  
you received the request for the documentation, or any extension of the date provided by your housing  
provider, your housing provider does not need to grant you any of the VAWA protections. Distribution or  
issuance of this form does not serve as a written request for certification.

Confidentiality: All information provided to your housing provider concerning the incident(s) of  
domestic violence, dating violence, sexual assault, or stalking shall be kept confidential and such details  
shall not be entered into any shared database. Employees of your housing provider are not to have access  
to these details unless to grant or deny VAWA protections to you, and such employees may not disclose  
this information to any other entity or individual, except to the extent that disclosure is: (i) consented to  
by you in writing in a time-limited release; (ii) required for use in an eviction proceeding or hearing  
regarding termination of assistance; or (iii) otherwise required by applicable law.
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): ______________________________

9. 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) _________________________

Public Reporting Burden: The public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. The information provided is to be used by the housing provider to request certification that the applicant or tenant is a victim of domestic violence, dating violence, sexual assault, or stalking. The information is subject to the confidentiality requirements of VAWA. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid Office of Management and Budget control number.