



Length of Stay Hardship Waiver Application

Instructions

This form is for families who want to apply for a **Hardship Waiver**. A Hardship Waiver allows families who have certain health and safety risks to stay in shelter for an additional 120 days after they have already received two 90-day extensions on top of their 9-month time limit.

Who can apply for a Hardship Waiver?

Not everyone is eligible for a Hardship Waiver. Use these questions to see if you might qualify.

Have you received two 90-day extensions to your time in shelter?
This means you have received a 007, 009 or 013 notice.

Yes No

Are you following all program rules and are you up to date with program requirements, such as case management meetings?

Yes No

Do any of the following statements apply to you?

Yes No

- I have an infant under 9 months old
- Someone in my family is more than 28 weeks pregnant
- Someone in my family has a high-risk pregnancy
- Someone in my family has a weakened immune system
- Someone in my family needs a medical device to help them breathe
- My family is working with the Department of Children and Families (DCF)
- My family is at risk of harm due to domestic violence

If you checked YES for all questions above, you may be eligible and you should fill out this form.

If you checked NO for any question, you are not eligible and you should not fill out this form.

When can I apply for a Hardship Waiver?

Applications must be submitted 45 to 30 days before your termination date. You can find the specific dates for your family on your 007, 009 or 013 notice. Late applications will only be accepted with good cause.

What happens after you submit this form?

We will review this form to see if you could be eligible for a Hardship Waiver.

- If your answers show that you are not eligible, we will deny your application.
- If your answers show that you could be eligible, we may:
 - Contact you to schedule an assessment with a medical provider.
 - Contact the Department of Children and Families (DCF) to ask about your meetings with them.
 - Contact the Department of Transitional Assistance (DTA) to ask about your meetings with them.
 - Contact you for more information.



Where should I submit this form?

Applications should be submitted via the self-service document upload tool. Some questions require supporting documents. You should upload your supporting documents with your application in the self-service document upload tool.

1. Go to the **Self-Service Document Upload Tool** at <https://applyhousinghelp.mass.gov/s/anonymousupload>.
2. Provide your **Last Name** and **Family Case Number**.
3. Click the "Next" option.
4. Click "upload documents" or drag and drop documents to upload your application form and any other supporting documents.
5. Click "Done".



If you don't know your **Family Case Number**, ask your EA Shelter Provider to help you find it.



Please answer all questions in this application truthfully and accurately. Not completing this form fully may result in a delay or denial of your application.

Family Information

We need some basic information about your family to process your application.

Please tell us some details about your family.

Head of Household Name

Head of Household Date of Birth

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MM	DD	YYYY			

Family Case Number

Phone Number

Email Address

Program Rules

You must be following all EA Family Shelter program rules and requirements to get a Hardship Waiver. You will not get a Hardship Waiver if you are behind on program requirements.

Please answer the following questions about the program rules.

Have you already been terminated from the program for a reason not related to the 9-month time limit?

Yes No

Have you been keeping up to date with your case management meetings and rehousing plans?

Yes No


Have you completed a 60-day Rehousing Assessment in the last 60 days?


Yes No



Clinical Risk

You may be eligible for a Hardship Waiver if your family has certain health conditions or risks. We are asking these questions to see if you meet the criteria.

 **Throughout this application, we will place this document symbol where you are required to upload a document. Applications cannot be processed without all required documents.**


 **If you are pregnant**, please upload a letter or document from a medical provider confirming that you are pregnant and your due date. You do not need to submit any other information about your pregnancy.

You should **not** upload medical documents for other questions. Any necessary medical checks will be completed by a nurse.

Please answer the following questions about your family's health.

Do you have an infant under 9 months old?

Yes No

 Does your family have a pregnant person in their third trimester (more than 28 weeks pregnant), or with a high-risk pregnancy?

Yes No

Do you or anyone in your family need special medical equipment to help you breathe?

Yes No

Do you or anyone in your family have an immunocompromising condition, including but not limited to active chemotherapy treatment, untreated HIV, sickle cell disease, or taking medicine for an organ transplant?

Yes No

Clinical Risk

If you need a medical assessment, you can choose how to complete it. **Please check the box next to the option you prefer.**

Option A is recommended as most families find this the quickest and most convenient option.

Option A: ** Recommended **
I would like a nurse from the Department of Public Health (DPH) to call me to complete my assessment virtually.

Option B
I would like to go in person to an assessment site (in Revere) to have my assessment completed by a nurse.

Option C
I would like to have my own medical provider submit the information necessary to confirm my eligibility.

Risk to Children

You may be eligible for a Hardship Waiver if a child in your family is at high risk, according to the Department of Children and Families (DCF).

Please answer the following question about child safety.

Is your family working with DCF regarding a risk of harm to a child who lives in shelter with you?

Yes No



Domestic Violence Risk

You may be eligible for a Hardship Waiver if your family is at risk of harm due to domestic violence. These questions ask more about your situation so we can determine if you are at risk. You are not required to file a police report in order to be eligible for a Hardship Waiver.

What is Domestic Violence?

Domestic violence is when someone harms or threatens another person they are in a close relationship with. Domestic violence (DV) can be physical, verbal, emotional, economic or sexual in nature. If you are experiencing domestic violence, there are people who can help. Go to mass.gov/info-details/domestic-violence-programs-for-survivors to find help local to you. Your EA Shelter Provider can also help you.

Some of the questions in this section require supporting documents. Please submit one or a combination of the following:

- Court, medical, criminal, child protective service, psychological, law enforcement or school records containing details of the domestic violence.
- Documents that show that you have obtained an order of protection or have taken other legal steps to end the domestic violence.
- Evidence that you have sought safety in a domestic violence shelter or similar refuge.
- Documentation of injuries such as medical records or photographs.
- If you are unable to obtain the required documentation, or if documents submitted are inconclusive for proving past or current domestic violence, submit a sworn statement from yourself and at least one other individual with knowledge of the circumstances that specifically details a history of domestic violence, rape or incest and other facts which support your application.

Note: A sworn statement is a person's statement of facts about a situation. The document is considered sworn by the writer including a statement that they understand it is a crime to knowingly submit false information.

The statement must include:

- The name, address, and phone number or email address of the person writing the statement.
- Your name, or the Hardship Waiver applicant's name.
- The date on which the statement is being made.
- A detailed statement about the domestic violence you have experienced or are experiencing.





Domestic Violence Risk


Is your family currently experiencing domestic violence, or has your family recently experienced domestic violence? Yes No


Do you believe that leaving EA Family Shelter would put your family at greater risk of harm due to domestic violence? Yes No

Is your family working with the DTA Domestic Violence Unit for help with recent domestic violence concerns? Yes No

 Is your family working with a specialist domestic violence organization for help with recent domestic violence? **If yes, please attach a supporting document.** Yes No

 Have you filed any police reports about domestic violence incidents? **If yes, please attach a copy to your application.** Yes No

 Do you have, or have you filed for, a restraining order against the abuser? **If yes, please attach a copy with your application.** Yes No

 Do you have a domestic violence safety plan? **If yes, please attach a copy with your application.** Yes No

In English, please explain why you believe that leaving shelter may place you or your child at risk of DV which may result in serious harm. If you need support to write in English, please contact your EA Shelter Provider for help.



Please remember to upload all relevant documents required in the section above.



Late Application



If you are submitting your application less than 30 days before your exit date, you must complete this section. Otherwise, skip to Page 7.

This section requires documents. You must upload documents with your application to support your reason for sending your application late.

Late applications will only be accepted in rare cases. For example:

- Your family has a new health or safety risk that makes you eligible for a Hardship Waiver. For example, someone in your family has recently developed a new health condition.
- Your family had a crisis or emergency that required your immediate attention and prevented you from submitting the application on time. Examples of emergencies are:
 - Serious illness or injury requiring treatment or hospitalization.
 - Death of a family member.
 - Being the victim of a crime.
 - Other emergencies beyond your control.


In English, please explain your reason for submitting your application late. If you need support to write in English, please contact your EA Shelter Provider for help.



Confirmation and Signature



Please make sure you have uploaded all documents. Go back and check all questions with the document icon.

 Please upload any documents you have as supporting evidence for your application.

I confirm this information is complete and accurate at the time the Hardship Application was completed and understand it is a crime to knowingly give false information. I give the Executive Office of Housing and Livable Communities (EOHLC) permission to contact other state agencies about my application.

Signature

Date

MM

DD

YYYY