

**LIVE-IN AIDE REQUEST FORM**

Applicant/Tenant's Name: \_\_\_\_\_

Applicant/Tenant's Address: \_\_\_\_\_

Current Phone #: \_\_\_\_\_

Applicant/Tenant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Definition of Live-in Aide:

A live-in aide is defined as a person who resides with a elderly or disabled and who:

1. Is determined to be essential to the care and well-being of the person.
2. Is not obligated for the support of the person.
3. The live-in aide may ***not be a member of the assisted family or once a member of the assisted family*** or would not be living in the unit except to provide necessary supportive service.

\*\*\* ***Please note:*** This person would be needed to stay overnight on a regular basis to justify sleeping space for this person, i.e. another bedroom.

I, \_\_\_\_\_, (*Applicant/Tenant's Name*) am providing the necessary information and documentation for the consideration of my approval to be added to the household as a live-in aide. I have attached a copy of the following required documents to this request: ***birth certificate, social security card, and a Valid NC State Issues Driver's license or Valid NC State Issued Photo (ID)***.

Name of Live-in Aide: \_\_\_\_\_

Relationship to Applicant/Tenant: \_\_\_\_\_ # of Minor Children to the live-in aide: \_\_\_\_\_

Current Address of Live-in Aide: \_\_\_\_\_

Social Security Number of Live-in Aide: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth of Live-in Aide: \_\_\_\_\_

Current Phone Number of Live-in Aide: \_\_\_\_\_ - \_\_\_\_\_

*I realize that no individual can be added to the household until Raleigh Housing Authority approves him/her. I also acknowledge that verification will not begin if the required documentation is not attached. I hereby give Raleigh Housing Authority permission to request and obtain any information or materials needed to complete and verify my eligibility as a live-in aide. A criminal background check will also be performed. If the individual has engaged in any criminal activities within the time period listed below, they will not be allowed to move into your unit. Misdemeanor within the last 5 years; Felony within the last 7 years*

\_\_\_\_\_  
*Signature of Live-In Aide*

\_\_\_\_\_  
*Date*

*(For Raleigh Housing Authority Use Only)*

***APPROVED:***      *Effective Date:* \_\_\_\_\_

***DISAPPROVED:***    *Reason for denial:* \_\_\_\_\_

*Housing Official Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_