

## **Somerset County Health Department**

8928 Sign Post Road, Suite 2, Westover, Maryland 21871 443.523.1700 • Fax 410.651.5680 • TDD 1-800-735-2258

Health Officer: Danielle Weber, MS, RN

## Homeless Identification and Birth Certificate Project Instructions to make a referral

**PURPOSE:** Program provides funding for birth certificates and/or State Identification/Driver's License renewals.

**ELIGIBILITY:** To qualify, the individual must be experiencing homelessness or is at imminent risk of becoming homeless, and have a mental illness or co-occurring substance use disorder.

Minor children in the care of a qualifying adult that meets the homeless and disability criteria are also eligible for birth certificates.

## **INSTRUCTIONS TO MAKE A REFERRAL:**

- 1. Verify individual meets the following requirements:
  - a. Is age 18 or older *OR* If the individual is under age 18, they must be in the care of an adult that meets criteria below
  - b. Has a mental illness or co-occurring substance use disorder
  - c. Currently homeless or at imminent risk of becoming homeless
  - d. The individual may not have requested funds from this project within the past 5 months
  - e. Individual is eligible for services within the public mental health system
- 2. Complete the application packet with the individual. Application includes the following:
  - a. The "Behavioral Health Administration Homeless I.D. Project FY 2021 Application/Intake".
  - b. The "Maryland Homeless I.D. Project Documentation of Homelessness". This is a self-verification of homelessness completed by the individual (including current situation, how long they have experienced homelessness, how many episodes of homelessness, what makes them at risk of homelessness, etc.). \*If the individual is currently staying in a shelter, please include a letter from the shelter.
  - c. The "Somerset County Core Service Agency Consent to release/obtain Confidential Information". This gives permission for your Homeless I.D. referral to be sent to Somerset County Core Service Agency for program monitoring.

3. Submit the application packet either by fax or mail. (NOTE: Application packets should be sent to the Core Service Agency where the individual is residing/located)

Somerset County LBHA 8928 Sign Post Road, Suite 2 Westover MD 21871

Phone 443-523-1716
Fax 410-651-3189
Email teresa.freyer1@maryland.gov