



**NORTH DAKOTA HOMELESS GRANT (NDHG)  
TRANSPORTATION ACTIVITY**  
PLANNING AND HOUSING DEVELOPMENT DIVISION  
SFN 60465 (05/23)

Participant Name
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**TRANSPORTATION**

This activity will be included the Shelter Operations and Homeless Prevention components. The transportation costs of travel by program participants to another state. This will be a one-time payment per program participant. In order to pay for transportation cost to relocate people to destination outside the state, the program participant must agree to the following:

Program participant certifies that they will be residing at the address below. Additional written documentation may be required.

Address	City	State	ZIP Code												
<table style="width:100%; border:none"> <tr> <td><input type="checkbox"/> Staying/living with a friend</td> <td><input type="checkbox"/> Staying/living with family</td> <td><input type="checkbox"/> Permanent housing (not RRH)</td> </tr> <tr> <td><input type="checkbox"/> Hotel paid for by you/family/friend</td> <td><input type="checkbox"/> Transitional housing for homeless youth</td> <td><input type="checkbox"/> Host home</td> </tr> <tr> <td><input type="checkbox"/> Owned, with subsidy</td> <td><input type="checkbox"/> Owned, no subsidy</td> <td><input type="checkbox"/> Rapid rehousing or similar</td> </tr> <tr> <td><input type="checkbox"/> Rental, no subsidy/voucher</td> <td><input type="checkbox"/> Rental, with subsidy (specify type)</td> <td><input type="checkbox"/> Rental with voucher (specify type)</td> </tr> </table>				<input type="checkbox"/> Staying/living with a friend	<input type="checkbox"/> Staying/living with family	<input type="checkbox"/> Permanent housing (not RRH)	<input type="checkbox"/> Hotel paid for by you/family/friend	<input type="checkbox"/> Transitional housing for homeless youth	<input type="checkbox"/> Host home	<input type="checkbox"/> Owned, with subsidy	<input type="checkbox"/> Owned, no subsidy	<input type="checkbox"/> Rapid rehousing or similar	<input type="checkbox"/> Rental, no subsidy/voucher	<input type="checkbox"/> Rental, with subsidy (specify type)	<input type="checkbox"/> Rental with voucher (specify type)
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Program participant must sign this form agreeing that this is a one-time assistance and acknowledge that they will not be eligible for the same assistance in the future.

Program participant must agree to let us keep track of this assistance and allow us to share this information with other homeless service providers in the State.

Participant Signature	Date
Intake Staff Signature	Date