

**CERTIFICATE OF ATTENDANCE**  
**REGIONAL PLANNING COUNCIL ON THE HOMELESS/**  
**CONTINUUM OF CARE**

All HOME TBRA applicants considered for funding must submit this completed form with their HOME TBRA Application. The chairperson of the corresponding Regional Planning Council (RPC) on the Homeless or Continuum of Care must complete the form and return to applicant.

Chairperson: By signing below, you are attesting that the information provided is honest and accurate based on 2014 calendar year attendance records.

<b>Date</b>	
<b>Applicant (agency)</b>	
<b>RPC/CoC Region</b>	
<b>Region Chair - print name</b>	
<b>Region Chair- sign name</b>	
<b>Phone</b>	
<b>E-mail</b>	

\_\_\_\_\_ **YES**, the above agency has attended at least 75% of the local Regional Planning Council (regional continuum of care) meetings in 2014. We have had \_\_\_\_\_ meetings and they have attended \_\_\_\_\_ of these meetings.

\_\_\_\_\_ **NO**, the above agency has not attended at least 75% of the local Regional Planning Council (regional continuum of care) meetings in 2014. We have had \_\_\_\_\_ meetings and they have attended \_\_\_\_\_ of the meetings.

Thank you!

