## **Individual Criminal Violations Declaration Statement**

## Is anyone in your home:

1. Trying to avoid a felony prosecution? □ Yes □ No			
	If yes, who?		
2. Fleeing from law enforcement? □ Yes □ No			
	If yes, who?		
3. Trying to avoid jail after conviction of a felony? □ Yes □ No			
	If yes, who?		
4. In violation of the conditions of probation or parole? $\Box$ Yes $\Box$ No			
	If yes, who?		
5.	Convicted of a drug-related felony committed on or after August 23, 1996?		
	□ Yes □ No If yes, who?		
6.	Was the conviction in North Carolina?  Yes  No		

## By signing this form, I am saying that: I understand the penalties for giving false information, and I have told the truth.

<b>Client's Signature:</b>	Date	•
Client's Signature:	Date	•

The North Carolina Division of Social Services does not discriminate against any person on the basis of race, color, national origin, disability, sex, or age in the admission, treatment, or participation in its programs, services and activities, or in employment