



**SUPPLEMENT TO APPLICATION FOR HOUSING
VETERAN PREFERENCE**

Hale Nā Koa 'O Hanakahi

C/O EAH Management Office
Honolulu Office
1103 Liliha Street, #102
Honolulu, HI 96817

Phone/Fax: (808) 466-8615

TDD: (877) 447-5991

Email: HN-management@eahhousing.org

Preference Eligibility

Two preference points will be given to veterans or surviving spouses of veterans. Each eligible veteran household will only receive 2 points for meeting either one of the two preferences. Applicant households without a veteran or spouse of deceased veteran will receive one point. If you qualify for a preference, it will help you rank higher in the lottery.

If you do not qualify for a preference, you will be ranked below those who do. After the lottery, all the applicants are ranked, then sorted by preferences. The list of applicants will then be ordered by preference priority before applicants without a preference. Applicants are then processed by preference priority, in lottery rank order.

Veteran Preferential Credit: 2 Points

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	1. Have you or a member in your household served in the active US military, naval, or air service?
<input type="checkbox"/>	<input type="checkbox"/>	Name of the household member who served in the active US military, naval, or air service: _____
<input type="checkbox"/>	<input type="checkbox"/>	2. Was discharge under conditions other than dishonorable?
N/A	<input type="checkbox"/>	
You must provide:		
1. DD Form 214, Certificate of Release or Discharge from Active Duty or		
2. DD Form 256, Honorable Discharge Certificate.		



Surviving Spouse Preferential Credit: 2 Points

<p>Yes</p> <p><input type="checkbox"/></p>	<p>No</p> <p><input type="checkbox"/></p>	<p>1. Are you or a member in your household a surviving spouse of a veteran in the US military, naval, or air service?</p> <p>If yes, name of the deceased veteran who served in the active US military, naval, or air service:</p> <hr/> <p>Name of the surviving spouse of the deceased veteran:</p> <hr/>
<p>You must provide:</p> <ol style="list-style-type: none"> 1. DD Form 214, Certificate of Release or Discharge from Active Duty or DD Form 256, Honorable Discharge, and 2. Marriage License, and 3. Death Certificate for deceased veteran (spouse). 		

No Preference: 1 Point

<p>True</p> <p><input type="checkbox"/></p>	<p>False</p> <p><input type="checkbox"/></p>	<p>1. My household does not include a veteran or spouse of deceased veteran.</p>
--	---	--

CERTIFICATION

I/We certify that all information in this application is true to the best of my/our knowledge, and I/We understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. All adult applicants, 18 or older, must sign and date the application.

SIGNATURE(S) (*Must be dated*):

(Signature of Tenant):	Date
(Signature of Co-Tenant):	Date
(Signature of Co-Tenant):	Date