

Family Self-Sufficiency Program Pre-Application

The goal of the Family Self-Sufficiency program is to assist participants in improving their education and job skills for the purpose of becoming gainfully employed. This is accomplished by encouraging additional education, job training, and more.

The FSS program routinely collaborates with community agencies to provide the resources that are necessary to assist participants in reaching their goals. Resources include services such as childcare, transportation, budgeting assistance, and credit repair. Existing GED programs, college courses, and local vocational and trade schools are utilized to assist participants in their educational needs.

The FSS participant will be required to establish goals such as completing educational training, resolving personal issues, and actively working towards reaching their goals. For completion of the FSS program, the participant must reach established goals, obtain and maintain employment throughout their participation in the program (ultimately securing full-time employment), and become independent of all TANF cash assistance for the last consecutive twelve months of their membership on the program.

To be eligible for the FSS program, the head-of-household must currently receive rental assistance in either the Housing Choice Voucher program or the Conventional Housing program. The FWHA FSS program is *voluntary*; therefore, only people who are genuinely interested in improving their life should participate!

ESCROW ACCOUNT CONTRIBUTION

Participants who become employed after signing the FSS contract will develop an escrow account when their portion of rent increases. When the participant pays an increased rent amount resulting from *earned* income (wages), the difference between what the initial rent was when the participant started the program and the increased will be deposited in the escrow account. This is an interest bearing savings account that receives monthly contributions based on the tenant's rent increase. Upon completion of the FSS contract, the funds in the account are given to the FSS participant.

EXAMPLE:

<u>Client Activity</u>	<u>Annual Income</u>	<u>Rent</u>	<u>Escrow Contribution</u>
Enter the FSS Program	\$2,256.00	\$50.00	\$-0-
Attend Training Program	\$2,256.00	\$50.00	\$-0-
Become Employed	\$15,000.00	\$250.00	\$200.00

(Initial rent of \$50.00 - rent increase to \$250.00 = \$200.00. That \$200.00 is deposited into an escrow account).

Don't put your career goals on hold for another day! Get started building your future and becoming self-sufficient by completing the attached pre-application form and returning it to:

Letetia Holt, Family Self-Sufficiency Specialist at FWHA
(817) 336-2419 ext. 2407

Fort Worth Housing Authority
Mailing: P. O. Box 430 Fort Worth, Texas 76101
Office: 1201 E 13th St Fort Worth, Texas 76102 TEL: (817) 336-2419 FAX: (817) 878-2476

Family Self-Sufficiency Program Pre-Application

Date: _____

Name: _____
Last First Middle / Maiden

Social Security Number: _____ Date of Birth: _____

Address: _____
Number Street City/State/Zip

Phone: _____
Home Work Cell

Email address: _____

Which FWHA type of housing assistance do you currently receive?

Public Housing Housing Choice Voucher Other _____

Do you have a high school diploma: Yes No or GED? Yes No

Circle the last grade you completed:

1 2 3 4 5 6 7 8 9 10 11 12 College: 1 2 3 4 5 6

Have you participated in any vocational training programs? Yes No

If yes, which program(s) and when? _____

What additional education do you feel you need? Check all that apply.

High School or GED College courses
 College Degree Vocational courses

Are there any problems or reasons that would prevent you from enrolling in a training or educational program now? Yes No

If yes, please explain: _____

What services do you think you and your family need?

Child care Education Job Training Career Counseling Personal counseling
 Transportation Child/Family management Other: _____

Source(s) of Income:

TANF Child Support Unemployment Spousal support Grant
 Employment Other: _____

For Internal Office Use Only:

Client Number: _____

Last Re-exam Date: _____

Contact Method/Date: _____

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