

Tenant Signature

TIMESHEET

Community Service or Self-Sufficiency Activities

Please complete one timesheet for each adult household member who is required to perform the community service requirements. You may complete your community service activities at any agency that provides activities that are "a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self- responsibility in the community." Political activities may not be counted as community service. Examples of eligible Community Services activities: schools, hospitals, local community (non-profit) agencies, homeless shelters, recreations centers, senior centers, food banks. You choose where you perform your volunteer services.

You may also participate in economic self-sufficiency activities. These include "job training, employment counseling, work placement, basic skills training, education (junior college, college), English proficiency, workfare, financial or household management, apprenticeship, and any program necessary to ready a participant for work (including a substance abuse or mental health treatment program), or other work activities."

A minimum of 8 hours per month, every month, must be completed for each family member who is not exempt and

is required to perform these activities: (Total hours required per year: 12 months X 8 hours per month = 96 hours) Name: Head of Household SS#:_____ Description of Activities Completed: Name of agency/school: Agency/school Address:_____ City:_____ State: ____ Zip Code: _____ Contact Person: Phone: _____ List dates and number of hours performed per month, each month. You need 96 hours per year. Month/Year **Number of hours** Month/Year Number of hours Month/Year Number of hours By signing below, I certify that I have completed the activities described above and I authorize the Housing Authority to contact the agency listed to verify my activities. I understand that failure to comply with the Community Service and Self-Sufficiency requirements may result in non-renewal of my lease.

Date

Community Service,

Economic Self Sufficiency Agency Signature

Date