



YUMA COUNTY HOUSING DEPARTMENT
 8450 WEST HIGHWAY 95, SUITE 88
 SOMERTON, ARIZONA 85350-2534
 PHONE (928) 304-7333 • TDD 1-800-545-1833 Ext. 705 • FAX (928) 304-7334

Family Self-Sufficiency (FSS) Program Interest Form

Name: _____ Social Security No: _____

Address: _____ Phone Home: _____ Work: _____

_____ Message Phone: _____

Total Number in Household: _____ Best Time to Contact: _____

1. Are you (Head of household) employed? Yes No
 Total Time On Your Job: _____ (If less than 1 year, list employment for last 2 years)
 Job Title: _____ Total Time on Job: _____
 Job Title: _____ Total Time on Job: _____

2. If unemployed, what type of income do you received? _____

3. Other than housing, what services would interest you and your family?
 Check as many as you like:

<input type="checkbox"/> Job readiness	<input type="checkbox"/> Transportation assistance
<input type="checkbox"/> Childcare	<input type="checkbox"/> Money management classes
<input type="checkbox"/> Job training	<input type="checkbox"/> Counseling
<input type="checkbox"/> Finish GED	<input type="checkbox"/> Basic skills classes
<input type="checkbox"/> College	<input type="checkbox"/> Youth Programs
<input type="checkbox"/> Basic home repair	<input type="checkbox"/> Parenting classes

4. What is the last grade you completed in school? _____
 Have you ever taken college courses? Yes No
 Have you ever taken job training courses? Yes No
 Are you interested in a job training program and/or completing your education?
 Yes No

Signature: _____ Date: _____



For alternative format/reasonable
 Accommodations, call TTY/TDD
 1-800-545-1833 Ext. 705