

## **Chapter 11 Part 1c - Recertification**

### **Community Service and Self-Sufficiency Requirement (CSSR) Certification For Non-Exempt Individuals**

#### **Recertification**

Date: \_\_\_\_\_

Participant Name: \_\_\_\_\_

I understand that as a resident of Shelton Housing Authority, I am required by law to contribute eight (8) hours per month (ninety-six (96) hours over the course of a year) of community service or participate in an economic self-sufficiency program.

Signature: \_\_\_\_\_

Date of Signature: \_\_\_\_\_