

Chapter 11 Part 1g – Work Out Agreement with Schedule

Community Service and Self Sufficiency Requirement Work-Out Agreement

In accordance with the provisions of the Shelton Housing Authority's Community Service and Self-Sufficiency Requirement (CSSR) Policy, I/We agree to complete all deficient service hours over the next twelve (12) month period ending _____.

I/We understand that Shelton Housing Authority may issue a thirty (30) day notice of lease termination if the service hour requirements of your lease are not brought into compliance by ____.

I/we understand what volunteer work qualifies as community service and what types of programs qualify for self-sufficiency participation.

Head of Household

Date

Other Adult Family Member

Date

SHELTON HOUSING AUTHORITY USE ONLY

APPROVED BY: _____

Date

Attachments: Schedule to Make Up Deficient Hours

Schedule to Make Up Deficient Hours

| HOURS DEFICIENT | NUMBER OF MONTHS TO COMPLETE |
|-----------------|------------------------------|
| 8 | 1 |
| 16 | 2 |
| 24 | 3 |
| 32 | 4 |
| 40 | 5 |
| 48 | 6 |
| 56 | 7 |
| 64 | 8 |
| 72 | 9 |
| 80 | 10 |
| 88 | 11 |
| 96 | 12 |