## Ann Arbor Housing Commission Family Self Sufficiency Interest Form

Name:			Head of Household?	Υ	N (circle one)
Address:			Phone:		
Email:			Contact Preference: I (circle one)	Phone	Letter Email
Check one:					
interested ple	ase complete the interested in parsing assistance lease sign and re	e rest of the for ticipating with benefits shoul	e Family Self Sufficiency orm, sign and return. In the Family Self Sufficient Id you choose not to pa	ency Pro	ogram. ( <b>You will NOT</b>
Name	Age	Email		Phon	e
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	_		paid envelope. A Family to set up a goal setting I		•
		H	ead of Household		
Signature	Da	te			
		Othe	r Adult Household Mem	nber	
		O+ha	r Adult Household Mem	hor	