



Family Self-Sufficiency Program Pre-Enrollment Application

“Start Living Your Dream”

Do you dream of returning to school? Starting a business? Buying a home? The Housing Authority of Racine County offers a special program that, as a voucher holder, you can take advantage of to help you obtain your dream of a better life for you and your family. Start the process now by filling out and returning this interest form.

First Name: _____ Last Name: _____

Current Address: _____ Apt#: _____

City: _____ ZIP Code: _____ E-mail Address: _____

Home Phone: _____ Work: _____ Cell: _____

I am interested in: (Please check all that apply)

- | | | |
|--------------------------|-------------------------|-------------------------------------|
| Finding a job/better job | Developing goals | Completing a job training program |
| Upgrading my job skills | Career Exploration | Finding childcare /better childcare |
| Accessing health care | Taking ESL classes | Improving my credit/learn to budget |
| Getting a college degree | Start a savings account | Obtaining my GED/HS diploma |

Other: _____

I have additional needs: (Please check all that apply)

- | | | | |
|------------|---------------|--|--------|
| Disability | Health Issues | Limited ability to read or speak English | Senior |
|------------|---------------|--|--------|

Other: _____

Family Self-Sufficiency History:

Have you participated in the Family Self-Sufficiency Program in the past? Yes No

If yes, were you awarded any escrow money during your participation? Yes No

Signature: _____ Date: _____

Fill out this form and return it to:

**Housing Authority of Racine County
Attn: Family Self Sufficiency Program
837 Main Street Racine, WI 53403**

A Family Self-Sufficiency Coordinator will contact you about developing your personalized action plan.

