



WORKFORCE DEVELOPMENT PROGRAM

Traditional FSS Pre-Enrollment Application

Reno Housing Authority's Workforce Development (WFD) facilitates HUD's Traditional Family Self-Sufficiency (FSS) program. Traditional FSS is a 5-year program that provides a pathway to financial literacy, career readiness and homeownership among Housing Choice Voucher and Public Housing residents.

WFD's mission is to strengthen family foundations with the intention of building generational wealth and fundamental skills to promote independence. Our hope is to lead RHA youth, adults and seniors to their fullest potential while participating in Workforce Development programs.

Individual Training and Services Plan (ITSP): As a Traditional FSS participant, you'll have the support of a WFD Coordinator to establish a goal plan (also known as an ITSP) that will help map out your journey to success while in the 5-year program. There are just 3 goals you'll have to meet at the time of graduation:

- Maintain Suitable Employment
- Family Free of Government Assistance (TANF)
- Completion of Fundamental Self-Sufficiency Workshops: SMART Goals, Financial Literacy, Time Management, Stress Management & Parenting (if applicable)

Quarterly Check-In's/Annual Assessments: As a Traditional FSS participant, you'll touch base with your WFD Coordinator every 3-months to discuss various updates, including goal progress, obstacles, your escrow balance, your rent credit opportunities and any changes to your ITSP.

Escrow Account: As a Traditional FSS participant, you'll also establish a savings!! Here's how it works - as your earned income increases from further education and new employment, your rent will increase - and RHA will match that increase each month in an escrow account for you! And get this - there is no limit to the amount you can escrow!! Once you complete your goals, you can cash out and use that money to reach even bigger dreams - like buying a new home!!

Program Incentives: Workforce Development loves to celebrate your progress! If you stay on track with your goals, you'll qualify for rent or escrow credits - to further encourage your success! As a participant, you'll also unlock access to WFD's Hardship Committee, that considers financial assistance to remove unexpected obstacles. We're here to support you!

***** Your path to success starts NOW - fill out the application below!! *****

Date: _____

1. Applicant Information

Name: _____ Are you Head of Household? Yes No

If not, Name of Head of Household: _____

Address: _____ City: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Do you have a computer and internet access at home? Yes No

2. Education/Training

What's your highest level of education? _____

Do you have your high school diploma or GED? Yes No

Do you have any additional education or training? Yes No

Additional Education/Training/Certifications	Completion Date (n/a if not completed)

3. Please check the areas of support you're interested in receiving:

- Homeownership
- Job Search/Retention
- Childcare
- Food Assistance
- Education/Job Training
- Professional Attire
- Driver's License/Transportation
- Financial Literacy (Budget, Credit, Debt)
- Mentoring
- Parenting Support
- Emotional Health/Counseling
- Physical Health/Medical Needs
- Addiction Treatment
- Basic Needs (Hygiene Products, Clothing)
- Phone/Computer/Internet Resources
- Other _____

4. Workforce Development Questions:

If you could have any dream career in the world, what would you choose and why?

Do you have any experience in your dream career?

What would you need to make your dream a reality?

Besides career goals, what other goals do you have?

What are your strengths?

What areas could you improve on?

What obstacles are keeping you from your goals?

Why do you want to join Traditional FSS?

Allows yourself to dream. Imagine life 5 years from now. You have your ideal career, money is no longer an issue and you're living in your dream home. Describe your life:

5. **Workforce Development Agreements:** Thank you for showing interest in the Traditional FSS program - we are so excited to work with you! Please read and check each box if you agree to the responsibilities you'll have while participating in the Traditional FSS program:

I understand all information on this document is confidential and will be used to develop my personal goal plan in Traditional FSS.

I understand if I am not responsive to my WFD Coordinator's quarterly requests for meetings, it may result in the termination of my Traditional FSS Contract of Participation.

I understand I must be, or make plans to seek, education or employment while in the Traditional FSS program.

I understand the accrual of escrow is based on the increased earned income of all applicable household members.

I understand I have the option to graduate from Traditional FSS before my Contract of Participation expiration date and cash out my escrow account early if I've met all the goals outlined on my ITSP.

I understand if I do not meet all program requirements and goals by the FSS Contract of Participation expiration date, the accrued escrow in my account will be forfeited.

I understand I have the option to request a (2) year contract extension in writing, if good cause for the extension can be identified.

I understand if I successfully complete the Traditional FSS program and obtain escrow funds from the Reno Housing Authority, I will not be permitted to participate in the Traditional FSS program a second time and I can not apply for housing assistance for (2) years from the date my housing assistance was relinquished.

I understand if my housing assistance is terminated for any reason, I will automatically be removed from the Traditional FSS program and my escrow funds will be forfeited.

I certify the answers given herein are true and complete to the best of my knowledge. I understand false or misleading information given in the program may result in the termination of my Traditional FSS Contract of Participation.

By checking this box and printing your full name below, you are agreeing to the terms of RHA's Workforce Development Program.

Traditional FSS Applicant Full Name

Date

WFD Coordinator Signature

Date



**WORKFORCE DEVELOPMENT PROGRAM
Release of Information**

I, _____, give my permission for my Workforce Development Coordinator to communicate (verbally or written) with any supportive services agency, as it relates to my self-sufficiency while in the Workforce Development Program. This release will remain effective until my participation in Traditional FSS has come to an end, or when I request the termination of this release in writing to my Workforce Development Coordinator.

By checking this box and printing your full name below, you are agreeing to the terms of Workforce Development's Release of Information.

Traditional FSS Applicant Full Name

Date

WFD Coordinator Signature

Date



Housing Authority of the City of Reno

WORKFORCE DEVELOPMENT PROGRAM Adult Photo & Video Release

Traditional FSS Applicant Full Name: _____

I, THE UNDERSIGNED, do hereby release the photographer/videographer and the Housing Authority of the City of Reno (RHA) from any and all liabilities and/or infringements by having a photograph and/or video taken of me and/or appropriately used by the photographer and/or the Housing Authority of the City of Reno.

I also grant the Reno Housing Authority permission to publish my photograph in the RHA calendar and/or any other RHA publications, post it online and/or in RHA social media and/or in any presentation promoting RHA. This will waive any rights afforded under the Privacy Act with respect to the foregoing. The photo and/or video may be utilized in any public or private manner and may be modified or altered to fit a specific use.

I waive the right to inspect or approve any finished product in which my likeness appears. I understand that I will not receive monetary compensation for the use of my likeness, that this authorization is indefinite and ongoing, and that the photograph(s) and/or video will become property of the Housing Authority of the City of Reno.

By checking this box and printing your full name below, you are agreeing to the terms of RHA's Adult Photo & Video Release.

Traditional FSS Applicant Full Name

Date



Housing Authority of the City of Reno

WORKFORCE DEVELOPMENT PROGRAM

Youth Photo & Video Release

Child Name: _____ Birth date: _____ Age: _____

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Child Name: _____ Birth date: _____ Age: _____

Child Name: _____ Birth date: _____ Age: _____

I, THE UNDERSIGNED PARENT OR GUARDIAN, do hereby release the photographer and the Housing Authority of the City of Reno from any and all liabilities and/or infringements by having a photograph taken of me, my son(s), or my daughter(s) and/or appropriately used by the photographer and/or the Housing Authority of the City of Reno or its partner agencies.

I also grant the Housing Authority permission to publish my/my child's photograph and/or video in the RHA calendar and/or any other RHA publications, post it online and/or in RHA social media. I understand partner agencies may also publish this/these image(s). This will waive any rights afforded under the Privacy Act with respect to the foregoing. The photo or video may be utilized in any public or private manner and may be altered to fit a particular use.

I waive the right to inspect or approve any finished product in which my child's/children's likeness appears. I understand I will not receive monetary compensation for the use of his/her/their likeness, that this authorization is indefinite and ongoing, and that the photograph(s) will become property of the Housing Authority of the City of Reno.

By checking this box and printing your full name below, you are agreeing to the terms of RHA's Youth Photo & Video Release.

Traditional FSS Applicant Full Name

Date



**WORKFORCE DEVELOPMENT PROGRAM
Nixle Notification Form**

Reno Housing Authority's Workforce Development (WFD) program is using Nixle to contact participants through email and text message. Nixle will allow WFD to send newsletters and event flyers to you via email, and event/workshop reminders or cancellations via text.

Please provide the phone number and email address you would like to use for the above notifications:

- Phone Number (including area code): _____

Do Not Text

- Email Address: _____

By checking this box and printing your name below, you are agreeing to the terms of Workforce Development's Nixle notifications.

Traditional FSS Applicant Full Name

Date

** Text messaging and/or data rates may apply.*

