TENANT WORK REQUIREMENT WORKSHEET

NAME: _____ **Head of House:** _____

ADDRESS: _____

			OUTCOME		
DATE	Job/class	LOCATION APPLIED/CLASS REGISTERED	HIRED	CLASS COMPLETED	Verification

DIRECTIONS:

Attach any certificates or required paperwork to the report.

This must be given to the SSC Housing Agency MONTHLY

SIGNATURES:

TENANT: _____

HOH: _____

HA REPRESENATIVE : _____