



The Housing Authority of the County of Cook
EXEMPTION RELEASE FORM – JOB TRAINING / EDUCATION

CLIENT NO. _____ UNIT NO. _____

NAME: _____

SOCIAL SECURITY NO: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE NO: _____ ALTERNATE NO: _____

****NOTICE****

Federal law requires adult residents of public housing to provide eight (8) hours of community service or to receive eight (8) hours of self-sufficiency training as a condition for retaining their tenancy.

An exemption from the community service / self-sufficiency requirement is provided for residents who currently participate in educational activities, job training, job search or are engaged in a work activity. You are requested to verify that the above-named resident participates in any of said activities.

NAME: _____

SOCIAL SECURITY NO: _____

ORGANIZATION'S STATEMENT

(Organization's Name) _____, is an organization engaged in the activity described below. We, hereby, certify that the named resident is engaged in the below-described activity on a [full-time/part-time] basis:

Vocational training (may not exceed 12 months)

On-the-job training

Job skills training directly related to employment

Full-time attendance in a course of study leading to a certificate of general equivalence

Work experience (including work associated with refurbishment of publicly assisted housing)

Education directly related to employment, in the case of an individual who has not received high school diploma or certificate of equivalency

Job search and job readiness assistance (not exceeding 6 weeks in any calendar year)

Other - _____

NAME OF ORGANIZATION: _____

FULL ADDRESS: _____

TELEPHONE NO: _____ FAX NO: _____

NAME OF ORGANIZATION REPRESENTATIVE: _____ SIGNATURE: _____

TITLE: _____ DATE: _____

FOR OFFICE USE ONLY

RECEIVED BY:		INITIALS:		DATE:	
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WARNING: Making a false statement or providing false information is a criminal offense under federal and local law. This agency will prosecute violations of this notice.