Housing Relocation & Stabilization Services Form

Housing Relocation & Stabilization Services must be documented at least once every 3 months during program enrollment if the period between program entry and exit exceeds 3 months, and at program exit.

Today's Date: _____/_____/_____ **Staff Member:** _____

Name:_____ Date of Birth:_____/_____/_____
(First) (Last)

☐ **Case Management** ☐ **Housing Search & Placement**

☐ **Legal Services** ☐ **Credit Repair**

Staff, please indicate which category:
☐ **Homeless Prevention**
☐ **Homeless Assistance**

Case Management

Used for activities for the arrangement, coordination, monitoring and delivery of services related to meeting the housing needs of program participants and helping them obtain housing stability. May include: counseling; developing, securing and coordinating services; monitoring and evaluating Program Participant progress; assuring the Program Participants' rights are protected; and developing an individualized housing and service plan, including a path to permanent housing stability subsequent to HPRP financial assistance.

Description of service provided:_____

_____

_____

Payee:_____ ☐ Staff Timesheet Attached

Amount Requested: $_____ Amount Approved: $_____ ☐ Statement/Invoice Attached

Date started: _____/_____/_____ Date assistance ended: _____/_____/_____

Staff Member:_____

Housing Search & Placement

Used for services or activities designed to assist individuals or families in locating, obtaining and retaining suitable housing. May include: tenant counseling; assisting individuals and families to understand leases; securing utilities; making moving arrangements; representative payee services concerning rent and utilities; and mediation and outreach to property owners related to locating or retaining housing.

Description of service provided:_____

_____

_____

Payee:_____ ☐ Staff Timesheet Attached

Amount Requested: $_____ Amount Approved: $_____ ☐ Statement/Invoice Attached

Date started: _____/_____/_____ Date assistance ended: _____/_____/_____

Staff Member:_____

Legal Services

Used for legal services to help people stay in their homes, such as services or activities provided by a lawyer or other person(s) under the supervision of a lawyer to assist Program Participants with legal advice and representation in administrative or court proceedings related to tenant/landlord matters or housing issues. Legal services related to mortgages are not eligible. Reimbursement will be limited to $125 per hour charge.

Description of service provided:_____

_____

_____

Name of attorney/legal representative:_____ ☐ Statement Attached

Amount Requested: $_____ Amount Approved: $_____ ☐ Legal Notice(s) Attached

Date started: _____/_____/_____ **Date assistance ended: _____/_____/_____**

Staff Member:_____

Credit Repair

Used for services that are targeted to assist Program Participants with critical skills related to household budgeting, money management, accessing a free personal credit report and resolving personal credit issues.

Description of service provided:_____

_____

_____

Name of credit counseling agency:_____ ☐ Statement Attached

Amount Requested: $_____ Amount Approved: $_____

Date started: _____/_____/_____ **Date assistance ended: _____/_____/_____**

Staff Member:_____