

FAMILY SELF-SUFFICIENCY (FSS) PROGRAM QUARTERLY PROGRESS REPORT

From: Rene Y Tarver, FSS Coordinator
To: Akiti Lee-Smalley

Date: 10/12/2007

How are you progressing on your FSS goals?

| GOAL | Did it/date achieved | Working On It (Please explain below) | Other (Please explain below) |
|---|----------------------|--------------------------------------|------------------------------|
| 1. Seek and maintain fulltime (at least 32 hours/week) permanent employment. | | | |
| 2. Independent of welfare/TANF for 12 consecutive months (all family members). | | | |
| 3. Obtain AA degree by May 2005. | | | |
| 4. Repair credit by 11/30/2008. | | | |
| 5. Complete steps necessary to prepare for homeownership by 11/30/2008. Successfully complete HUD approved pre-homeownership program. Successfully complete financial literacy class. Save \$___ for down payment. | | | |

Please explain, "working on it" or "other" here:

Are there any additional goals you'd like to work on? Yes No

What successes have you had in the last three months (promotions, new job, graduation, etc)?

Are you interested in future homeownership? Yes No

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(continued)**

Are you presently employed? Yes No

Where? _____

Position _____ Full Time Part Time ___hrs/wk

Are you or anyone in your household receiving Cal Works/TANF? Yes No

Are you in school or a training program? Yes No

Name of school or program _____

When will you graduate or complete the program? _____

Please let me know how everything is going for you and your family. Also, please let me know of any changes in your present circumstances.

Would you like to meet to discuss things personally? _____

If so, when is the best time to call you? _____

Do you have an email address? Yes No Email address _____

Comments:

CITY OF OCEANSIDE HOUSING AND NEIGHBORHOOD SERVICES DEPARTMENT

Signature _____

Date _____

Thank you for taking the time to complete this report.