



County of San Diego

HEALTH AND HUMAN SERVICES AGENCY

HOUSING AND COMMUNITY DEVELOPMENT SERVICES

3989 RUFFIN ROAD, SAN DIEGO, CA 92123

(858) 694-4801 • FAX (858) 467-9713

FAMILY SELF-SUFFICIENCY APPLICATION

The Family Self-Sufficiency (FSS) program promotes economic independence and self-sufficiency for participating families. When a family enrolls in the FSS program, they are required to sign a contract of participation (for five years) that outlines a series of steps that will help the family become more self-sufficient. The final goals are to be employed and for all members of the household to be off of welfare programs (including Cal-Works and General Relief) for at least 12 consecutive months. As a participating family increases their income and pays more of their rent, due to increased earnings/wages, the Housing Authority will generally deposit an equal amount into an escrow account for the family. When all of the goals are met, the family will get the money that has accumulated in their escrow account, including interest.

Name of Head of Household (please print) _____

Daytime Phone Number: _____

Email Address: _____

Employment/Income

Are you currently employed? _____ Full Time? (32+ hours/wk) _____ Part-Time? _____

What is your job title? _____

When did you start your job? _____

How do you feel you can excel in your job or current field? _____

Do you have any health benefits from your job? (please circle all that apply) HEALTH RETIREMENT OTHER

If you are not employed, what do you see as your major difficulty in finding employment? _____

Are you currently receiving welfare benefits? (Cal-Works, General Relief, and TANF etc.) _____

Education/Training

What is the highest grade you completed in school? _____

Do you have any college degrees? _____

Do you have your high school diploma? _____ Or GED? _____

If you answered no to having a diploma or GED, would you be interested in obtaining one? _____

Do you feel that furthering your education would help you reach your goal of self-sufficiency? _____

If yes, what education or vocational (including certifications) goals do you have? _____

Are you currently attending school or job training (including CalWorks)? _____

If yes, what is the name of the school or training program and where is it located? _____

What is the goal of your studies/training? _____

When will you finish? _____

Transportation

Do you have your own transportation? _____ Car Insurance? _____

Do you use public transportation? _____ Is public transportation conveniently located? _____

Childcare

When employment is found, do you have adequate childcare?

If yes, who will provide that childcare? _____

If no, what have been some of the difficulties you have had in finding childcare? _____

Computer

Do you have a working computer at home or access to a computer outside of your home? _____

Do you have an email? (Please circle) Yes No

If no, would you be willing to create one so that we may send you resources? _____

Self-Sufficiency Goals

What are your goals for the next 5 years?

- ☐ To be off of welfare programs
- ☐ To be employed full time as a _____
- ☐ To have a _____ degree in _____
- ☐ To own my own home
- ☐ Other _____

How are you going to meet your goals?

- ☐ Look into training/education opportunities
- ☐ Start training or education What will you study? _____
- ☐ Finish training or education What are you studying? _____
- ☐ Job search
- ☐ Visit a career counselor
- ☐ Improve English language skills
- ☐ Other _____

Do you need referrals to any of the following services?

- | | |
|---|--|
| <input type="checkbox"/> Money Management/Budgeting | <input type="checkbox"/> Childcare |
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Credit repair |
| <input type="checkbox"/> Health Services | <input type="checkbox"/> Homeownership classes |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Other: _____ |

What are the two biggest challenges you are facing right now? _____

What do you feel are your barriers to becoming self-sufficient? _____

Have you ever participated in an FSS program? Where/when? Did you complete the program?

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