

Participant Report of Change **Increase**

Please Note: The Housing Authority will require a new hire letter, award letter or last three paystubs and employers full contact information. Please read the second page for more instructions.

Head of Household: _____ SS#: _____

Address: _____ Worker: _____

Home Phone: _____ Cell Phone: _____ Message Phone: _____

E-Mail: _____

1. **My income has INCREASED. (Attach a new hire letter, award letter or last three paystubs)**

Date of Change: _____ Name of person with change: _____

Employer/Agency: _____

Full Address: _____

Managers Name: _____

Contact Number: _____ Fax Number: _____

*** Note: You must continue paying your current rent portion until you receive a new Notice of Rent Amount from the Housing Authority. The AHA will process interims within 45 days of receiving ALL required information and documentation.**

2. **Student Status Change:** An adult member of my household (someone other than the head of household) **Is** or **is no longer** a **FULL TIME** student (as defined by the school or program) at a school or job training program.

Adult Student's Full Name	College/Program & Address	# Units	Date of Change

3. **Other:** Explain

SIGNATURE _____

(Head of Household)

Date