

Cheyenne Housing Authority

Community Service Exemption Certification CSSR 4

I certify that I am eligible for an exemption from the Community Service requirement for the following reason:

- () I am 62 or older;
- () I am a person who is blind or who is disabled and I certify that based on this disability, I cannot comply with the requirements or I am a primary caretaker of such individual;
(Disability must be or have been verified)
- () I am working 30 hours or more per week;
(Employment verification will serve as documentation)
- () Exempt from Work Requirements by State Program: I am receiving TANF or benefits from another state welfare program and am exempt from related work requirements.
(Must provide verification letter from agency)
- () I am a member of a family receiving assistance, benefits or services under TANF or any other State welfare program and have not been found to be in noncompliance with such program.
(Must provide verification from the funding agency that you are complying with job training or work requirements)
- () I am a full time student;
(Must provide verification of school schedule.)
- () Other;
Please explain: _____

Resident

Date

