

# PARTICIPANT CHANGE FORM (Section 8)

Dear Participant:

The following information is needed **ONLY** if there has been a change in your address, family composition, income, current housing or living arrangements.

**PLEASE PRINT and complete entire form**

Applicant Name: \_\_\_\_\_ SSN \_\_\_\_\_

Current Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Phone Number(s): Home # \_\_\_\_\_ Work # \_\_\_\_\_ Other/Message # \_\_\_\_\_

Check the box that applies to your **Application Change**:

My **mailing address** has changed. My new mailing address is:

\_\_\_\_\_  
 \_\_\_\_\_

My **family composition** has changed. My new family composition is as follows:

Name	MI	Relationship	Sex	Age	SSN	DOB

Please Note: If you are removing a family member from your application, please indicate the reason why:

\_\_\_\_\_

My **housing situation** has changed. My new housing information is as follows:

Are you now living in Public Housing or HUD subsidized Housing?  Yes  No

If yes, please tell us where? \_\_\_\_\_

My **family income** has changed. My new family income is as follows:

*Please update your income: Employment, Unemployment Comp, Social Security, SSI, TANF, Direct Contributions, etc.*

**NEW** Employer: \_\_\_\_\_ Phone No# \_\_\_\_\_

Address: \_\_\_\_\_ Rate of pay: \$ \_\_\_\_\_ (Hourly)

Hours per week: \_\_\_\_\_ I get paid:  Weekly  Bi-Weekly  Monthly

**FORMER** Employer: \_\_\_\_\_ Phone No# \_\_\_\_\_

Address: \_\_\_\_\_ Last date of work: \_\_\_\_\_

Reason for leaving employment: \_\_\_\_\_

Other changes in family income (explain): \_\_\_\_\_

**WARNING:**

Section 1001 of Title XVII of the United States Code makes it a criminal offense to make willful gales statement or misrepresentations to any department or agency of the Unity States as to any matter within its jurisdiction. I certify that the above information is correct and I understand that any misrepresentation will be grounds for denial or termination with the Section 8 Housing Choice Voucher Program or Public Housing Program.

\_\_\_\_\_ Date \_\_\_\_\_

Client's Signature

