



CalWORKs Housing Support Allocation (CHSA) Housing Stability Plan

Participant Information		Date:	
Name:		Case Name:	
Phone #:	Email:	Case #:	

Case Manager Name	Phone#	CWHS Approval Date

Housing Stability Need e.g. rent, utility, financial literacy, employment, savings plan, etc.	Goals/Planned Activities to Address Housing Stability Need e.g. save 30% monthly, build history of on-time rent payment, attend financial literacy class, become employed, receive rent and utility assistance from CWHS, etc.	Expected Timeframe to Complete Goal (in weeks or months)	Completed Y/N
	1.		<input type="checkbox"/> Yes <input type="checkbox"/> No
	2.		<input type="checkbox"/> Yes <input type="checkbox"/> No
	3.		<input type="checkbox"/> Yes <input type="checkbox"/> No
	4.		<input type="checkbox"/> Yes <input type="checkbox"/> No
	5.		<input type="checkbox"/> Yes <input type="checkbox"/> No
	6.		<input type="checkbox"/> Yes <input type="checkbox"/> No

Related Goal from above	Tasks/Actions to Accomplish this Goal e.g. open a savings account, pay rent by due date, Issue warrant to PGE for utility move in cost, request homeless assistance payment for deposit from PAS, monthly home visit, call regarding legal expungement, etc.	Participant or Case Manager	Due Date	Completed
1.				<input type="checkbox"/> Yes <input type="checkbox"/> No
2.				<input type="checkbox"/> Yes <input type="checkbox"/> No
3.				<input type="checkbox"/> Yes <input type="checkbox"/> No
4.				<input type="checkbox"/> Yes <input type="checkbox"/> No
5.				<input type="checkbox"/> Yes <input type="checkbox"/> No
6.				<input type="checkbox"/> Yes <input type="checkbox"/> No

Services and Referrals Provided		
<input type="checkbox"/> WTW Employment Services	<input type="checkbox"/> Substance Abuse	<input type="checkbox"/> Legal Assistance
<input type="checkbox"/> Housing Assistance	<input type="checkbox"/> Parenting Classes	<input type="checkbox"/> Criminal Record Expungement
<input type="checkbox"/> Utility Assistance	<input type="checkbox"/> Individual Counseling	<input type="checkbox"/> Financial Literacy Workshop (i.e. Budgeting/Saving)
<input type="checkbox"/> Domestic Abuse	<input type="checkbox"/> Couples Counseling	<input type="checkbox"/> Credit Counseling
<input type="checkbox"/> Mental Health	<input type="checkbox"/> Family Counseling	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Crisis Intervention	<input type="checkbox"/> Anger Management	<input type="checkbox"/> Other: _____

Comments/Progress



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Financial Expense Plan

Record expected expenses/assistance amounts. Complete one month at a time. Revise/update on an ongoing basis.

Month	Type of Expense	Due Date	Total Amount Due	Amount from Other Resources	Amount Participant will Pay	Amount Approved from CWHSA	Total Expense Paid Date

Savings Plan-10 to 30% Monthly

Record amount saved monthly. Asset limits are \$2,000 or \$3250 (if AU includes disabled or age 60+). If total assets reach within \$500 of these limits, explore with PAS the family opening a restricted account.

Month	Amount Saved	Total Balance of Savings Account

Verifications Received

Refer to CalWORKs Housing Support Allocation Handbook for Additional Details/Acceptable Verification

- | | |
|--|--|
| <input type="checkbox"/> YC 379 CHSA Questionnaire
<input type="checkbox"/> Family is Receiving CalWORKs
<input type="checkbox"/> Family Meets Homeless Definition
<input type="checkbox"/> CalWORKs Homeless Assistance has been Exhausted | <input type="checkbox"/> Amount and Payee Verified for Each Approved Payment
<input type="checkbox"/> Home is Deemed Safe and Inhabitable
<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____ |
|--|--|

Comments/Progress

I/We agree to comply with the terms of this plan and the terms in my landlord agreement. I/We understand that the amount and duration of assistance provided will depend on my unique situation, is dependent on me meeting the requirements in this plan and will be determined on a month to month basis.

Participant(s) Signature		Date	
ESS Signature	Date	CHSA ESS PS Signature	Date