

**Office of Homeless Services
Housing Placement Agreement**

Participant Name: SS NO:	OHS Case #:
Shelter Case Manager:	Date:

The mission of the Office of Homeless Services (OHS) is **to make homelessness rare, brief, and, non-recurring.** As your Case Manager, I agree to work with you to connect you with housing opportunities and resources that respect your choices and preferences, including but not limited to:

- Security deposit, first and last month's rent
- Assistance with paying off utility bills
- Rapid Rehousing (rental assistance)
- Transitional Housing
- Permanent Supportive Housing
- Private Market Housing
- Other public and private housing programs in the community

As a participant seeking stable housing, I understand and agree to the following:

- Housing applications will be initiated within the first 7 days of my stay in emergency housing to assist me with obtaining stable housing.
- Acceptance into a housing program does not mean that I will be able to move in immediately.
- I understand I will need to work with my Case Manager to submit required documentation and attend meetings and appointments that will help me get housing.
- I understand that I will be offered housing option and will be expected to accept one so that I can end my experience of homelessness.
- If I repeatedly turn down appropriate, available housing options, I understand I will be given 30 days to make their own arrangements.
- I understand I may appeal this decision prior to the end of the 30 days. Discharge may be reconsidered **if** there are extenuating circumstances that sufficiently support the reason for refusing (turning down) housing.

Participant Signature

Date

2nd Participant Signature

Date

Case Manager Signature

Date