PASADENA HOUSING OFFICE
1149 ELLSWORTH DRIVE
PASADENA TEXAS 77506
PHONE: (713) 475-5544
FAX: (713) 920-7941

Name:

Voucher #:
Caseworker:

DUE DATE:

STATEMENT OF WORK SEARCH

As a family with low or no income you should make an active search for work. To fulfill your obligation, you should keep a record of the employers contacted as indicated below. This information should be turned in at the end of every month until employment is found. Failure to meet this responsibility could result in termination of your Housing Assistance and / or result in an overpayment. ***This program is here for you until you achieve economic independence. Your continued progress is our concern.***

NAME AND ADDRESS OF BUSINESS	PHONE NUMBER	PERSON CONTACTED	DATE OF OF CONTACT	RESULT OF THE THE CONTACT

I understand that I am obligated to make employer contacts and furnish information on this form that is true to the best of my knowledge. I will return this to my caseworker by the date due and continue searching until employment is found. I have been explained to and understand that by not returning requested documents is a violation of my Family Obligations and reason for termination of my Housing Assistance.
I have personally made the contacts listed above.

Signature of participant Date

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