

Self-Sufficiency Program (SSP) Reference Form

(Applicant Name)	(Date)
This form cannot be completed by a friend or family member and <u>must</u> educational plan and career goals.	be completed by an individual who knows the applicant's
This individual has completed a Pre-Application to the Self-Sufficiency Proplease refer to the "What is SSP?" informational flyer for a description of the as openly as possible to help us assess whether SSP is a good match for the us with additional information regarding the applicant by attaching and form will remain confidential in the applicant's file and will be viewed on	the Self-Sufficiency Program. Answer the following questions e individual given their strengths and needs. You may provide other sheet of paper to this reference form. Your reference
(Reference Name)	(Reference Signature
(Agency / affiliation)	(Phone number)
How do you know the applicant?	
How would you describe them as a student? an employee? a tenant?	a parent? a client?
What do you consider as their current challenges and needs?	
Describe their level of commitment and self-motivation.	
What progress have you seen them make towards their educational and	career goals?
Other Comments:	

Please email, fax, or mail this form to Tafisi Suafai | email: tsuafai@hiphousing.org HIP Housing 800 South Claremont #210, San Mateo, CA 94402 650-348-6660 x380 or FAX 650-348-0284

<u>Confidentiality:</u> Application information is confidential with some exceptions which are allowed or mandated by law including: if the applicant is a danger to self or others, suspected abuse or neglect of children or the elderly, by court order, or discussions with professionals for consultation.