



**MOVE TO OPPORTUNITY MOBILITY PROGRAM APPLICATION**

**Housing Opportunities Made Equal of Virginia, Inc., 626 E. Broad Street, Suite 400, Richmond, VA 23219  
Telephone: (804)354-0641 Fax: (804)354-0690 VA Relay: 711 HOMEofva.org Help@HOMEofva.org**

Please complete this form if you are interested in participating in the Move to Opportunity Mobility Program. The program includes mobility counseling, education and landlord recruitment service. The program model emphasizes the ability to move from low-opportunity communities to neighborhoods of higher opportunity.

APPLICANT LEGAL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP \_\_\_\_\_

HOME TELEPHONE #: \_\_\_\_\_ CELL: \_\_\_\_\_ WORK: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

**AUTHORIZATION TO RECEIVE AND RELEASE INFORMATION**

I hereby give my permission to Housing Opportunities Made Equal of Virginia staff to provide and obtain all information deemed necessary to assist in my search and attainment of rental housing as a participant of the Move to Opportunity Mobility Program. The authorization includes my:

- Housing Choice Voucher Administrator/Agent
- Landlord/Property Manager of Properties I seek to Rent
- Current or Previous Landlord/Property Manager

I acknowledge that this authorization is given voluntarily, with my informed consent and is valid until I am no longer participating in the Mobility Program and all funding source requirements are met. I also acknowledge this authorization may be revoked at any time, but not retroactive to information already released in accordance with the authorization.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**AUTHORIZATION TO OBTAIN YOUR CREDIT REPORT**

To assist with your housing search and to provide counseling and education on credit and money management, we would like to obtain your credit report. Your signature below authorizes Housing Opportunities Made Equal of Virginia staff to obtain your credit report.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



## **Move to Opportunity - Mobility Program Disclosure Form**

Housing Opportunities Made Equal (HOME) is pleased that you have come to us for services and are looking forward to working with you. We are here to assist you with housing. Generally, your services will include the following:

- The gathering of essential demographic and financial information to address your housing needs
- An assessment of your housing situation and need
- A housing action plan that provides instructions and identifies resources for addressing your housing need
- Individual face to face ,telephone and/or group counseling designed to guide you through the process to address your housing need
- Follow-up calls and/or letters to track the outcome of our services

Housing Opportunities Made Equal of Virginia, Inc. upholds the highest standards of customer service. As such, HOME of Virginia, Inc. staff members providing these services will adhere to the following guidelines:

HOME does not offer legal counsel or services. HOME staff members will provide counseling, group education and/or instructional information only regarding your housing, personal financial management or credit situation under this program.

HOME does not provide debt consolidation services nor will any member of HOME's staff take over or assume responsibility for the finances of any participating client.

HOME does not pay or receive fees or other considerations for referrals to or from any program administered by HOME.

HOME staff members will not recommend that clients participate or engage in any services whereby the staff members themselves or any member of their immediate family have a financial interest.

No staff member of HOME will disclose any personal information without proper authorization of the participant.

HOME strongly believes in and promotes housing choice. To that end, HOME does not endorse any landlord, property management company, realtor, lending institution or any other housing industry entity. Participants in HOME's Programs select those providers that best suits their needs.

HOME, in many instances, will need to pull your credit report in order to assess the condition of your credit and financial readiness to obtain and maintain housing. It is possible that this action will have a negative effect on your credit score. HOME will use this option sparingly and will work to minimize any negative effect on your credit report.

HOME employs persons who are qualified to provide the services rendered. Please be advised that all HOME counselors are required to be certified as Professional Housing Counselors. New counselors employed by HOME have one year to acquire such certification, which can be obtained through the Virginia Association of Housing Counselors, the National Federation of Housing Counselors or NeighborWorks. A biographical sketch of each counselor will be shared at group session or individual counseling session.

Central to HOME's mission is the elimination of housing discrimination. All of HOME's programs and services are required to educate participants about fair housing.

All services are free to qualifying participants and are funded by one or more of the following sources: US Department of Housing and Urban Development; The Virginia Department of Housing and Community Development; The City of Richmond, Virginia, Department of Community Development; Virginia Housing & Development Authority (VHDA); Neighborworks; The County of Henrico Virginia, Department of Community Revitalization; The County of Chesterfield, Virginia, CDBG Department; The Greater Richmond Community Foundation; Genworth; Bank of America and other private donors.

In signing this document you are acknowledging that you understand that the funders listed above will have access to your information for the purpose of program monitoring, compliance, and evaluation.

Also in signing this document I am acknowledging my Housing Choice Voucher Administrator will be made aware that I am participating in the Move to Opportunity Program.

This certifies that I have read and understood the above statement of disclosure.

---

**Program Participant Signature**

---

**Date**