Verification of Receipt of Required Documents

RE:		SSN	XXX-XX-	
	Applicant's Name (print)		(last four digits)	
It is required that the client be provided with the information listed below. The client's signature on this document when maintained in the client file will serve as proof of delivery to the client. Check all applicable actions below. The client must initial after each checked box.				
	Notification of Rights to Fair Housing information provided and reviewed			
	Anti-Discrimination Policy provided and reviewed			
Personal Privacy Protection Policy information provided and reviewed				
Confidentiality Agreement provided and reviewed				
Grievance Policy and Appeals Process provided and reviewed				
Termination Policy provided and reviewed				
Program Policies and Rules provided and reviewed				
□	☐ Dangers of Lead Based Paint information provided and reviewed			
□	VAWA Notice of Occupancy Rights (Form HUD-5380)			
□	_ VAWA Certification of Domestic Violence	, Dating V	iolence, Sexual Assault, or Stalking,	
	and Alternative Documentation (Form HU	JD-5382)		
docume	that I have provided the client with the informa ents/publications indicated and allowed the clients to ensure a thorough understanding of the i	ent opporti	unity to ask questions regarding these	
Signatu	re of intake staff or case manager		Date	
	******ALL ADULT HOUSEHOLD MEMBER	S MUST S	IGN THIS DOCUMENT*****	
	derstand that KHC and/or HUD may review the y/our eligibility for the program or for auditing po		n contained in my/our file in order to	
	tify that I/we have received the documents notens and have those questions answered satisfac		/we was provided the opportunity to ask	
Applicant Signature			Date	
Other Adult Household Member Signature			Date	

