

925 W. Northland Avenue Appleton, WI 54914 Phone (920) 739-6811 Fax: 739-6817 TDD: 731-2406

## Section 8 and Public Housing Application CHANGE FORM

Date:		
Name:		Phone:
Social Secu	rity Number:	
I would like	e to make the following changes	to my application:
Old Address:		New Address:
		Date of Change
<b>Preference</b>	Changes:	Date of Change
	I presently live or work in Out	agamie County or the City of Appleton.
	Families with head of household, spouse or sole member employed at least 25 hours a week. Self-employed household members must meet requirements of net monthly earnings equal or exceed the dollar value of 25 hours per week at minimum wage or sole member is age 62 or older, or is a person with disabilities.	
	I presently attend an educational institution in Outagamie County.	
	Name of Educational Institution	
	I presently have a source of income.	
	I presently have a rent burden of paying more than 50% of my income towards	

Sign: \_\_\_\_\_

Comments:

rent.