

Head of household name	Social Security Number	Date modified (mm/dd/yyyy)
------------------------	------------------------	----------------------------

23j. Self-Sufficiency Contract Information

(1) Initial start date (mm/yyyy) of contract of participation	23j(1).
(2) Initial end date (mm/yyyy) of contract of participation	23j(2).
(3) Contract date (mm/yyyy) extended to (if applicable)	23j(3).
(4) Number of family members with Individual Training and Services Plan	23j(4).
(5) Did the family receive selection preference because of a related service program participation? (Y or N)	23j(5).

23k. Escrow Account Information

(1) Current account monthly credit	\$	23k(1).
(2) Current account balance	\$	23k(2).
(3) Account amount disbursed to the family (cumulative as of end of reporting period)	\$	23k(3).

23m. Exit Information (complete only for Exit Report)

(1) Did family complete FSS contract of participation or MTW self-sufficiency program? (Y or N)
(2) If (1) is Yes, did family move to homeownership? (Y or N)
(3) If (1) is No, reason for exit: <input type="checkbox"/> Left voluntarily <input type="checkbox"/> Asked to leave program <input type="checkbox"/> Portability move-out <input type="checkbox"/> Left because essential service was unavailable <input type="checkbox"/> Contract expired but family did not fulfill obligations