



Joint Municipal Housing Cooperative

117 Main Street, Bladenboro, NC 28320
Telephone (910) 863-4919 ♦ Fax (910) 863 - 3000

EXECUTIVE DIRECTOR

Stevie Craig

Community Service Exemption Certification

I, _____, certify that I am eligible for an
(Tenant's Name)

exemption from the Community Service requirement for the following reason:

- I am 62 years old or older
- I have a disability which prevents me from working (Certification of Disability Form will serve as documentation)
- I am currently working (employment verification form will serve as documentation)
- I am participating in a Welfare to Work Program (must provide verification letter from agency)
- I am receiving TANF and am participating in a required economic self-sufficiency program or work activity (Must provide verification from the funding agency that you are complying with job training or work requirements)
- I am a full time student (Must provide verification letter from institution attending)
- I am a member of a family receiving assistance under SNAP, and has been found by the administering State to be in compliance with program requirements.

Tenant's Name

Date

Occupancy Specialist's Name

Date