

FAMILY SELF-SUFFICIENCY PROGRAM**INTERIM – Escrow Disbursement Request Form**

A request for an interim disbursement of funds from an escrow account will be considered on a case-by-case basis by the FSS Staff, based on the following policies:

1. The Participant is in good standing with RRHA, in compliance with the lease, and has met certain interim goals. 6-IC.
2. An interim withdrawal of FSS escrow funds may only be used to pay for activities or services connected to the goals recorded on the participant's Contract of Participation (COP)– Individual Training and Services Plan (ITSP), at the time of the request. Interim disbursements are not meant to pay ongoing expenses. (Exceptions can be made for a one-time payment of certain expenses needed to complete goals or task-related) 6-IC
3. The participant must be actively working on the goals listed on their plan, and current documentation (dated within the last 30 days) verifying these goal-related activities must be provided with the disbursement request form.
4. The total amount of funds in the escrow account may not be withdrawn for disbursement.
5. All escrow disbursements must be approved by the Family Self Sufficiency Coordinator and/or Program Manager.
6. It must be verified by the welfare agency that the participant is not receiving welfare before an interim disbursement.

Please note: All requests for an interim disbursement will be reviewed for eligibility by the FSS Coordinator. Please allow up to 2 weeks for a decision, and if approved an additional 4 weeks for processing and final disbursement of funds. Contact your FSS Coordinator if you have any questions.

Procedures and Timeline

Step 1. Submit the completed request form along with supporting documentation to support the need for the funds as aligned with the goals on your service plan to:

Marcella Tazewell | Family Self-Sufficiency Coordinator
Calhoun Family Investment Center
436 Calhoun Street, Richmond VA 23220
Via email: marcella.tazewell@rrha.com

Step 2. You will receive a decision regarding the approval or denial of the interim disbursement request by email.

Step 3. Payment timeline – If approved, you will be contacted to set up a time to come sign for your disbursement; ID Required.

Step 4. At RRHA's discretion, escrow funds may be paid directly to the vendor or service provider. A participant who receives an interim disbursement is **required** to provide RRHA with verification/proof of payment to the vendor, service provider, or retail organization within 2 weeks from disbursement pick-up; unless stated/ documented otherwise per FSS STAFF.



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Date: _____

FSS Participant: _____ SS Number (Last 4) _____

Disbursement Amount Requested: \$ _____

Identify the ITSP goal category that the funds will help you to complete (check one)

- Employment, Education, Training, Financial, Homeownership, Transportation, Other

Please state below, how you will use the funds to remove a barrier associated with completing this ITSP goal:

Four dashed lines for text entry.

Attached is the current verification (Invoice, receipt, school schedule etc.) that verifies my goal-related activities, which warrant the need for funds from the FSS escrow savings account.

Printed Name of FSS Participant: _____

Signature of FSS Participant: _____ Date: _____

Address: _____ Zip Code: _____

Phone Number: _____

For office use only:

Client Tenant ID _____

- Tenant is in good standing with RRHA
Family is working towards achieving FSS goals
Request is consistent with FSS goal(s)

Request Approved on: (Date) Request Denied on: (Date)

FSS Coordinator Signature _____ Date _____

Program Manager Signature _____ Date _____