

**Navigation toward HSN Supportive Housing Program**  
**Acknowledgment of Program Parameters**

I, \_\_\_\_\_, acknowledge that:  
Participant Printed Name

- I am applying for a Supportive Housing program. This program offers rental assistance and case management, and supportive services.
- If approved, I understand that rental assistance through the supportive housing program is not guaranteed. Funding may change, and this can affect whether rental assistance is available.
- I understand that there is no guarantee how long I will receive support which means my financial support could end while I'm in housing and have a lease in my name.
- If that were to happen, my case manager would work with me to help plan for this transition, however, I would be responsible for my entire monthly rent payment and all obligations under my lease.

I confirm that I have received a copy of this information.

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Navigator Printed Name

\_\_\_\_\_  
Navigator Signature

\_\_\_\_\_  
Date