

**FAMILY SELF-SUFFICIENCY  
INTEREST FORM**

NAME: (first) \_\_\_\_\_ (last) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

MESSAGE NUMBER: \_\_\_\_\_

**I WOULD LIKE ASSISTANCE IN THE FOLLOWING:**

(Check the type of training you are interested in. You may check more than one.)

G.E.D PREPARATION \_\_\_\_\_  
HIGH SCHOOL DIPLOMA \_\_\_\_\_  
CAREER/JOB TRAINING \_\_\_\_\_  
SMALL BUSINESS TRAINING \_\_\_\_\_  
OTHER \_\_\_\_\_

**I WOULD LIKE CAREER/JOB TRAINING IN THE FOLLOWING AREA:**

(check one or more)

ADMIN/OFFICE \_\_\_\_\_  
CLERICAL/SECRETARIAL \_\_\_\_\_  
CHILD CARE \_\_\_\_\_  
COMPUTERS \_\_\_\_\_  
CONSTRUCTION \_\_\_\_\_  
RETAIL/FOOD/HOSP \_\_\_\_\_  
SKILLED TRADE/CRAFT \_\_\_\_\_  
OTHER (PLEASE SPECIFY) \_\_\_\_\_

**MY FAMILY NEEDS THE FOLLOWING SERVICES:**

(check all services needed by your family)

CHILD CARE \_\_\_\_\_  
COUNSELING \_\_\_\_\_  
PERSONAL AND HEALTH RELATED SERVICES \_\_\_\_\_  
TRANSPORTATION \_\_\_\_\_  
YOUTH RELATED SERVICES \_\_\_\_\_  
OTHER (PLEASE SPECIFY) \_\_\_\_\_

**Mail To:  
Culver City Housing Division  
Attn: Dameon Dunn  
9770 Culver Boulevard  
P.O. Box 507  
Culver City, CA 90232-0507**