

Community Services Block Grant (CSBG) Program Agreement

As a participant in the ICAA Community Services Block Grant program, I

(Printed Client Name)

Agree to the following items:

_____ To complete and initial screening, intake and application

_____ To read and keep a copy of the Program Guidelines

_____ To work collaboratively with the case manager and other program staff as well as service providers to maintain services that assistance has been provided for

_____ To keep in contact with the case manager and other program staff as to the status of services after assistance is granted. This will be on a 30, 60 and 90, day schedule from date of assistance

I further understand that failure to comply with the above items could result in

- A halt in CSBG services provided
- Termination of participation in the CSBG program
- Permanent disqualification for CSBG program services

I agree with the terms and requirements to receive CSBG services. I also understand that providing false information will result in disqualification/termination from the program.

I understand that this is NOT an entitlement program. Decisions on participation are based on a review of information for a household and if that household meets the criteria for eligibility to participate in the CSBG program, the availability of funds and staff availability for participation.

Client Signature

Date