

**Family Self-Sufficiency (FSS)
Program Coordinator Funding**

**U.S. Department of Housing
and Urban Development**
Office of Public and Indian Housing

OMB Number: 2577-0178
Expiration Date: 08/31/2020

PART I: General Information. (To be completed by all applicants.)

A. State or Regional PHA? Yes No

B. Are you a PHA/Indian/Tribe/TDHE that is currently administering an FSS program? Yes No

C. PHA/Indian Tribe/TDHE
Legal Name:

DUNS Number:

Employer/Taxpayer Identification
Number (EIN/TIN):

Address:

Street1:

Street2:

City:

County/Parish:

State:

Province:

Country:

Zip / Postal Code:

PHA Number of Applicant:

Legal Name of Joint Applicant
PHA/Indian Tribe/TDHE:

PHA Number of Joint Applicant:

PART IV: Salary Comparability

Applicants' salary requests are subject to salary comparability requirements as prescribed in the most recent FSS NOFA. Salary requests must be based on local comparables, and demonstrate comparability of the requested salary to similar positions in the local jurisdiction. Salary comparables must be kept on file in the offices of the PHA or tribe/TDHE. **Please review the most recent FSS NOFA carefully for further instructions on completing the information below.**

Please respond to each question below:

Is your agency requesting funding for non-supervisory FSS position(s)?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Is your agency requesting funding for supervisory FSS position(s)?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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INSTRUCTIONS:

- A.** The FSS NOFA supplements this set of instructions. Please read the NOFA carefully to ensure that you are following all instructions in completing this form.

D. Salary Comparability (Part IV)

The information in the examples below is NOT real and is only used to show how to fill the information in the salary comparability tables under Part IV of this form

Please respond to each question below:

Is your agency requesting funding for non-supervisory FSS position(s)? Yes No

Is your agency requesting funding for supervisory FSS position(s)? Yes No

Salary Comparability (Non-Supervisory Position) (Part IV.A.)

Occupation Title					
Case Worker					
Annual Salary	\$40,990	Fringe Benefits	\$15,500	Total Amount (Annual +Fringe Benefits)	\$56,490
Source					
Careeronestop.org					
Name of Agency Point of Contact (POC)					
Prefix		First	James	Middle	
Last	Smith			Suffix	
POC Email Address					
jsmith@agency1.org					
POC Telephone Number					
(978) 450-1212 ext 125 Enter as (999) 999-9999					

Occupation Title					
Community and Social Service Specialist					
Annual Salary	\$45,200	Fringe Benefits	\$16,275	Total Amount (Annual +Fringe Benefits)	\$61,475
Source					
Agency 2					
Name of Agency Point of Contact (POC)					
Prefix		First	Joe	Middle	
Last	Smith			Suffix	
POC Email Address					
Joe.smith@agency2.org					
POC Telephone Number					
(978) 555-5555 Enter as (999) 999-9999					

Occupation Title					
Community Outreach Specialist					
Annual Salary	\$42,500	Fringe Benefits	\$16,500	Total Amount (Annual +Fringe Benefits)	\$59,000
Source					
Agency 3					
Name of Agency Point of Contact (POC)					
Prefix		First	Jane	Middle	
Last	Jones			Suffix	
POC Email Address					
jjones@agency3.org					
POC Telephone Number					
(978) 434-6667 Enter as (999) 999-9999					

Salary Comparability (Supervisory Position, if applicable) (Part IV.B.)

Occupation Title
Residents Services Director

Annual Salary	\$53,500	Fringe Benefits	\$18,180	Total Amount (Annual +Fringe Benefits)	\$71,680
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Source
Agency 1

Name of Agency Point of Contact (POC)

Prefix First James Middle

Last Smith Suffix

POC Email Address jsmith@agency1.org

POC Telephone Number (978) 450-1212 ext 125 Enter as (999) 999-9999

Occupation Title
Community and Social Service Manager

Annual Salary	\$50,200	Fringe Benefits	\$20,000	Total Amount (Annual +Fringe Benefits)	\$70,200
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Source
Agency 2

Name of Agency Point of Contact (POC)

Prefix First Joe Middle

Last Smith Suffix

POC Email Address Joe.smith@agency2.org

POC Telephone Number (978) 555-5555 Enter as (999) 999-9999

Occupation Title
Community Outreach Manager

Annual Salary	\$54,230	Fringe Benefits	\$16,500	Total Amount (Annual +Fringe Benefits)	\$70,730
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Source
Agency 3

Name of Agency Point of Contact (POC)

Prefix First Catherine Middle

Last Jones Suffix

POC Email Address c.jones@agency3.org

POC Telephone Number (978) 434-6667 Enter as (999) 999-9999