



## Participant Roster

Agency: \_\_\_\_\_

Service Month: \_\_\_\_\_

Participant's Name		CalWORKs Case? Yes/no	CalWORKs Case#	Date Referred to the FSC	Date Screened	Date Assessed	Employed Yes/No?	Other income Type	Current Housing Status	Date Secured Permanent Housing	Permanent Housing, Address & Phone # (Required Field)	FSC Exit Date
Ex	Jane Doe	Yes	B1234L1	07/01/14	07/01/14	07/03/14	Yes	SSI	Hotel	09/01/14	1212 Happy Dr L.A., CA 90000 (213) 555-5656	10/31/214
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Note: For Housing Status and Income Type, refer Participant Roster Instructions Tab.

