

# Appendix D

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Date

Addressee  
Address

Dear

As you know, the Department of Housing and Urban Development is conducting a nation-wide study to measure the amount and sources of error associated with determinations of eligibility and tenant rent in the Public Housing, Section 8, Section 202, and Section 811 programs. In addition to the tenant data we are already collecting at your PHA or project, ORC Macro has been asked to collect information from PHA and project staff regarding your procedures for conducting certifications and recertifications. This information will be used to prepare project characteristic findings related to the tenant level data.

Enclosed is a questionnaire that includes questions related to:

- Number and types of staff
- Staff training
- Communicating information from HUD to staff
- Quality control processes
- Conducting interviews
- Verification procedures

Please ask the appropriate person at your PHA or project to complete this questionnaire and return it to us by date.

If you are the contact person for more than one program or project in our study, we have enclosed multiple copies of the questionnaire. Please note that the label on the front of the questionnaire indicates the specific project for which we are collecting information. If the responses to the questions are the same for all or some of the programs or projects for which you are responsible, you may indicate such by responding: "please see responses for (name of project or program)" in the appropriate section(s). Return **all** forms to ORC Macro.

Once again, we thank you for your cooperation with this study. We know you are busy and have many commitments. However, we also know you recognize how important this information is to HUD. If you have any general questions about this study, please feel free to call me. I can be reached at 301-572-0239, or through ORC Macro's toll free number, 877-392-9776. If you have questions about our authorization to collect this data, please contact Yves Djoko, the Government Technical Representative for the study, at 202-708-0426 ext. 5851.

Sincerely,

Sophia Zanakos, Ph.D.  
Deputy Project Director

2006 Quality Control for Rental  
Assistance Subsidies Study  
PHA/Project Staff Questionnaire

July 24, 2006



Attn: Laura Webb  
11795 Beltsville Drive  
Calverton, MD 20705

Throughout this survey, we use the following terms:

- **“PHA/project” refers to EITHER:**
  - The PHA that administers either the Public Housing or Section 8 Voucher Program,
  - OR**
  - A project administered by a private management company or PHA.
- **“(re)certification” refers to BOTH move-in certifications AND annual recertifications.**

PLEASE CIRCLE YOUR RESPONSE OR FILL IN THE BLANK WITH YOUR ANSWER.

**I. NUMBER AND TYPES OF STAFF**

1. As of today, how many staff does your PHA/project employ, including full-time and part-time? \_\_\_\_\_staff

THE FOLLOWING QUESTIONS ARE ABOUT THE STAFF WHO CONDUCT (RE)CERTIFICATION TASKS SUCH AS:

- interviewing the tenant or gathering information from the tenant
- calculating the rent
- tracking verification
- supervising staff who perform these tasks

DO NOT INCLUDE STAFF WHOSE PRIMARY ROLE IS INSPECTING UNITS, FILING, SERVING AS RECEPTIONIST, SCHEDULING APPOINTMENTS, SORTING MAIL OR OTHER TASKS NOT RELATED TO THE (RE)CERTIFICATION PROCESS.

2. As of today, how many staff do you have that work on (re)certification or verification tasks? \_\_\_\_\_staff
3. As of today, how many units do these staff support? \_\_\_\_\_units
4. Do these staff work mostly on (re) certification, or do they do a variety of tasks?

	<b>Check one:</b>
Mostly work on (re) certifications	<input type="radio"/>
Work on a variety of tasks	<input type="radio"/>
Depends on the person	<input type="radio"/>

5. Do (re)certification staff have a caseload of specific tenants which they handle on an ongoing basis?  Yes  No

IF YES: ON AVERAGE, HOW MANY CASES ARE ASSIGNED TO A STAFF MEMBER? \_\_\_\_\_CASES

6. Do you have any minimum education requirements for new employees who will be working with (re)certifications?  Yes  No

IF YES: WHAT ARE THE REQUIREMENTS?

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7. Do you have any other minimum requirements for employees who work with (re)certifications?  Yes  No

IF YES: WHAT ARE THE REQUIREMENTS?

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## II. TRAINING FOR NEW (RE)CERTIFICATION STAFF

The following questions ask about how your PHA/project trained new (re)certification staff in the past 12 months. By new (re)certification staff, we mean both new hires and staff who were (re)assigned to conduct (re)certifications.

1. In the past 12 months, were any new staff assigned to conduct (re)certifications?  Yes  No

IF **YES**, GO TO QUESTION 2.

IF **NO**, SKIP TO PAGE 4, SECTION III, TRAINING FOR (RE)CERTIFICATION STAFF WITH SOME EXPERIENCE.

2. How many new staff were assigned to conduct (re)certifications in the past 12 months? \_\_\_\_\_ staff
3. In the past 12 months, on average about how many hours of training did each new (re)certification staff receive? \_\_\_\_\_ hours
4. In the past 12 months, did all new (re)certification staff receive the same training?  Yes  No
5. For new staff trainings conducted in the past 12 months, how often did your PHA/project use the following training activities?

		Never	Occasionally	Usually	Always
a.	New staff read HUD/PHA/owner manual, watched videos, or asked informal questions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b.	New staff used tele-course or Internet/web-based training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c.	Supervisor/senior staff held training sessions with new staff explaining procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d.	New staff worked one-on-one with experienced staff during the conduct of (re)certifications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e.	New staff attended training conducted by outside organization (e.g., HUD, NAHRO)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f.	Other training activity (specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

### III. TRAINING FOR (RE)CERTIFICATION STAFF WITH SOME EXPERIENCE

The following questions ask about training given to experienced (re)certification staff in the past 12 months. By experienced (re)certification staff we mean any staff, other than the new staff, who were assigned to conduct (re)certifications.

1. In the past 12 months, how many experienced (re)certification staff received training to change or improve the way they conduct (re)certifications? \_\_\_\_\_ staff

IF **NONE**, SKIP TO PAGE 5, SECTION IV.

2. In the past 12 months, on average about how many hours of training did experienced (re)certification staff receive? \_\_\_\_\_ hours

3. In the past 12 months, did all experienced (re)certification staff receive the same training?  Yes  No

4. For experienced staff trainings conducted in the past 12 months, how often did your PHA/project use the following training activities?

	<b>Never</b>	<b>Occasionally</b>	<b>Usually</b>	<b>Always</b>
a. Experienced staff read HUD/PHA/owner manual, watched videos, or asked informal questions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Experienced staff used tele-course or internet/web-based training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Supervisor/senior staff held training sessions with experienced staff explaining procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Experienced staff worked one-on-one with other experienced staff to conduct (re)certifications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Experienced staff attended training conducted by outside organization (e.g., HUD, NAHRO)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Other training activity (specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. In the past 12 months, what topics were covered in experienced staff meetings?

	<b>Check all that apply:</b>
a. HUD policies and rules for conducting (re)certifications	<input type="radio"/>
b. Tools available in the PHA/project (e.g., software, forms) to help in conducting (re)certifications	<input type="radio"/>
c. How to conduct interviews	<input type="radio"/>
d. Changes in HUD or PHA/project policies or procedures related to (re)certifications	<input type="radio"/>
e. Other topic (specify) _____	<input type="radio"/>

#### IV. COMMUNICATING HUD INFORMATION

These questions ask about how your PHA/project communicates changes in HUD and/or internal PHA/Owner policies, rules, and procedures for conducting (re)certifications to staff.

1. In the past 12 months, what methods did you use to communicate changes in HUD policies affecting eligibility or rent calculations to your staff?

IF YOU ARE THE ONLY STAFF MEMBER, CHECK HERE →   
AND SKIP TO QUESTION 2.

**Check all that apply:**

- |   |                       |
|---|-----------------------|
| a. Formal training session  | <input type="radio"/> |
| b. Detailed staff memo describing the changes and providing instructions for implementation     | <input type="radio"/> |
| c. Brief staff memo describing the change in regulation without instructions for implementation | <input type="radio"/> |
| d. One-on-one discussions between supervisors/managers and staff                                | <input type="radio"/> |
| e. Copies of HUD announcement distributed to staff  | <input type="radio"/> |
| f. Word of mouth between workers  | <input type="radio"/> |
| g. Staff meetings   | <input type="radio"/> |
| h. Newsletters  | <input type="radio"/> |
| i. Other method: (specify) _____  | <input type="radio"/> |

2. In the past 12 months, when you had questions about HUD policies—what they meant or how they should be implemented—how did you get answers to your questions?

**Check all that apply:**

- |  |                       |
|--|-----------------------|
| a. Asked HUD field office or other HUD staff   | <input type="radio"/> |
| b. Held meetings or talks with other PHAs/owners (e.g., round tables, regional meetings) | <input type="radio"/> |
| c. Used contractors/consulting services  | <input type="radio"/> |
| d. Asked questions at a HUD training session   | <input type="radio"/> |
| e. Used internet/web-based information/training  | <input type="radio"/> |
| f. Referred to HUD/PHA/owner manual  | <input type="radio"/> |
| g. Watched training videos   | <input type="radio"/> |
| h. Figured the answer out for yourselves   | <input type="radio"/> |
| i. Other method (specify) _____  | <input type="radio"/> |



## V. QUALITY CONTROL

The next questions are about how your PHA/project reviewed work done by (re)certification staff in the past 12 months.

1. In the past 12 months, how often was (re)certification work monitored by the following?

	<i>Never</i>	<i>Occasionally</i>	<i>Usually</i>	<i>Always</i>
a. Team leader or supervisor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Co-worker	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Staff auditor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Contracts administrator	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Outside auditor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. HUD or HUD contractor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Someone else (specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. In the past 12 months, how often did reviewers use the following techniques to monitor (re)certifications?

	<i>Never</i>	<i>Occasionally</i>	<i>Usually</i>	<i>Always</i>
a. Sitting in on the interview with the client	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Reviewing files while in process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Reviewing files after completion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Discussing (re)certification with staff while in process	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Discussing (re)certification with staff after completion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Using pre-designed form to check key steps	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Making individualized notes for each case reviewed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Re-interviewing the household	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Using computer program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Other method: (specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. In the past 12 months, what methods did you use to select cases for review?

**Check all that apply:**

- |   |                          |
|---|--------------------------|
| a. Randomly spot checked a percent of all cases                       | <input type="checkbox"/> |
| b. Checked cases on certain dates or times of year                    | <input type="checkbox"/> |
| c. Checked certain cases completed within a given period              | <input type="checkbox"/> |
| d. (Re)certifications conducted by new staff                          | <input type="checkbox"/> |
| e. Files with certain characteristics or anomalies                    | <input type="checkbox"/> |
| f. (Re)certifications made by staff who had past performance problems | <input type="checkbox"/> |
| g. Review all cases   | <input type="checkbox"/> |
| h. Other method (specify) _____                                       | <input type="checkbox"/> |

4. In the past 12 months, how often were the following kinds of errors found?

	<b>Often</b>	<b>Occasionally</b>	<b>Never</b>
a. Mistakes in calculating rent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Missing or incomplete verification of income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. missing or incomplete verification of expenses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Overdue recertifications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Determination that applicants are eligible when in fact they are not.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Other (specify _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. In the past 12 months, how much of a problem were the following reasons for errors in eligibility determinations and rent calculations?

	<b>Serious</b>	<b>Some</b>	<b>None</b>
a. Not having enough staff to handle the workload	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. The complexity of HUD regulations concerning rent computations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. The complexity of determining eligibility for assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Tenants providing inaccurate or incomplete information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Frequent change in HUD regulations concerning eligibility for assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Other (specify _____)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## VI. CONDUCTING TENANT INTERVIEWS

These next questions ask about how your PHA/project conducts tenant interviews to gather information from the tenant during the (re)certification process.

1. In the past 12 months, how many minutes did a typical initial certification interview take? \_\_\_\_\_minutes
2. In the past 12 months, how many minutes did a typical annual recertification interview take? \_\_\_\_\_minutes
3. What proportion of your tenants speak a language other than English as their primary language? \_\_\_\_\_percent

IF **NONE**, SKIP TO QUESTION 5.

4. How do project staff communicate with these tenants during (re) certification interviews?

**Check all that apply:**

- |                                       |                       |
|---------------------------------------|-----------------------|
| a. Bilingual staff are available      | <input type="radio"/> |
| b. Tenants bring their own translator | <input type="radio"/> |
| c. Other (specify)_____               | <input type="radio"/> |

5. Do you have a standardized interview guide you use when you conduct (re)certification interviews?

**Check one:**

- |  |                       |
|--|-----------------------|
| Yes  | <input type="radio"/> |
| No   | <input type="radio"/> |
| We don't conduct an interview as part of the (re)certification process | <input type="radio"/> |

6. In the past 12 months, how difficult was it for tenants to answer questions about the following?

	<i>Very Difficult</i>	<i>Somewhat Difficult</i>	<i>Not at all Difficult</i>
a. Earned income	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Sporadic or intermittent income	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Income received from absent family members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Income from self-employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Other income (e. g., Social Security, retirement, TANF)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Child support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Training program participation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Household composition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Child care expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Medical expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Assets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Other questions (specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

## VII. AUTOMATION

These next questions ask about how your PHA/project used computers and computer software in the past 12 months.

1. In the past 12 months, did your PHA/project use computer software to do any of the following?

**Check all that apply:**

- |   |                          |
|---|--------------------------|
| a. Interview tenants and record answers                             | <input type="checkbox"/> |
| b. Keep track of pending verifications                              | <input type="checkbox"/> |
| c. Input verified information                                       | <input type="checkbox"/> |
| d. Calculate rent, income, or allowances                            | <input type="checkbox"/> |
| e. Print the 50058/50059 form                                       | <input type="checkbox"/> |
| f. Conduct accounting tasks   | <input type="checkbox"/> |
| g. Track maintenance activities                                     | <input type="checkbox"/> |
| h. Print letters to the tenants                                     | <input type="checkbox"/> |
| i. Assign recertification dates/appointments                        | <input type="checkbox"/> |
| j. Print checks   | <input type="checkbox"/> |
| k. Submit tenant information to HUD                                 | <input type="checkbox"/> |
| l. Conduct rent reasonableness comparisons                          | <input type="checkbox"/> |
| m. Record tenant age, ethnicity, family size, or other demographics | <input type="checkbox"/> |
| n. Keep other types of statistics (specify) _____                   | <input type="checkbox"/> |

2. In the past 12 months, what percent of your PHA/project's 50058/50059 data were transferred to HUD via PIC/TRACS? \_\_\_\_\_percent

IF YOU DIDN'T TRANSMIT ANY DATA VIA PIC/TRACS, SKIP TO PAGE 12 SECTION VIII.

3. In the past 12 months, what method did you use to transmit 50058/50059 data to HUD?

**Check all that apply:**

- |                                 |                          |
|---------------------------------|--------------------------|
| a. Directly                     | <input type="checkbox"/> |
| b. Through another agency       | <input type="checkbox"/> |
| c. Other method (specify) _____ | <input type="checkbox"/> |

## VIII. VERIFICATION PROCEDURES

These next questions ask about your procedures for verifying tenant information.

1. In the past 12 months, how did your PHA/project staff keep track of when verification information was received?

**Check all that apply:**

- |  |                          |
|--|--------------------------|
| a. Kept files with outstanding verification in separate location | <input type="checkbox"/> |
| b. Marked on calendar  | <input type="checkbox"/> |
| c. Marked on a paper list/tickler file                           | <input type="checkbox"/> |
| d. Kept record in tenant file                                    | <input type="checkbox"/> |
| e. Tracked by computer   | <input type="checkbox"/> |
| f. Other method (specify) _____                                  | <input type="checkbox"/> |

2. In the past 12 months, who kept track of verification requests and returns?

**Check all that apply:**

- |                                    |                          |
|------------------------------------|--------------------------|
| a. Project (re)certification staff | <input type="checkbox"/> |
| b. Supervisor or manager           | <input type="checkbox"/> |
| c. Clerical staff                  | <input type="checkbox"/> |
| d. Other staff (specify) _____     | <input type="checkbox"/> |

3. In the past 12 months, how often did you use the Tenant Assessment Sub System (TASS) or Enterprise Income Verification (EIV) System to verify the following?

IF YOU **NEVER** USE TASS OR EIV, CHECK HERE →  SKIP TO QUESTION 5.

	Never	Occasionally	Usually	Always	Not Applicable
Employment Income	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Security/SSI Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unemployment Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Black Lung Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dual Entitlement Benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. In what month and year did you begin using TASS or EIV? \_\_\_\_\_ / \_\_\_\_\_

Month Year

5. In the past 12 months, how often did you verify the following?

	<i>Never</i>	<i>Occasionally</i>	<i>Usually</i>	<i>Always</i>
a. Age of household members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Social Security numbers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Income from employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Sporadic/infrequent/seasonal employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. TANF/Welfare benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Social Security benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Child support payments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Other sources of income	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Value of assets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Medical expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Child care expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Disability expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. Citizenship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. Disability status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o. Full time student status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p. Other information (specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



6. In the past 12 months, how difficult was it to verify the following?

	<i>Very Difficult</i>	<i>Somewhat Difficult</i>	<i>Not at all Difficult</i>
a. Age of household members	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Social Security numbers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Income from employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Sporadic/infrequent/seasonal employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. TANF/Welfare benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Social Security benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Child support payments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Other sources of income	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Value of assets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Medical expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Child care expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Disability expenses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m. Citizenship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n. Disability status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o. Full time student status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p. Other Information (specify) _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. In the past 12 months, when you had problems in obtaining complete verifications, how much of a problem were the following issues?

	<b>Serious</b>	<b>Some</b>	<b>None</b>
a. Tenants providing incomplete or inaccurate information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Employers not responding to verification requests in a timely manner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Employers not providing all the requested information	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Other agencies (e.g., Social Security Administration; TANF agency) not responding to requests in a timely manner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Staff not following up on requests for verifications that have not been answered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Not having enough staff to complete all of the verification procedures for all of the item that should be verified.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Other (specify _____)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. In the past 12 months, how cooperative were the following people in obtaining verification information?

	<b>Usually Cooperative</b>	<b>Sometimes Cooperative</b>	<b>Usually not Cooperative</b>
a. Tenants	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Employers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Financial institutions (e.g. , banks, investment firms)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Social services (e.g. , Social Security, TANF, Food Stamps, Child Support Enforcement)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Health care providers (e.g. , doctors, pharmacies)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Education institutions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Insurance companies (e.g., health insurance)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Other (specify _____)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. In the past 12 months, what procedures did you follow when verification was not provided as requested?

**Check all that apply:**

- |   |                          |
|---|--------------------------|
| a. Sent follow-up letter to third party                 | <input type="checkbox"/> |
| b. Called third party                                   | <input type="checkbox"/> |
| c. Sent follow-up letter to tenant                      | <input type="checkbox"/> |
| d. Called tenant  | <input type="checkbox"/> |
| e. Accepted other/less preferred verification           | <input type="checkbox"/> |
| f. Electronic verification or data matching (e.g., EIV) | <input type="checkbox"/> |
| h. Other (specify)_____                                 | <input type="checkbox"/> |

## **IX. CONCLUSION**

In the spaces below, please enter the name, title, telephone number, and email address of the person who completed this questionnaire.

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

TELEPHONE  
NUMBER: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

Please use the enclosed envelope to return the survey to ORC Macro.

Our toll free fax number is 1-800-823-0127.

**THANK YOU FOR COMPLETING THE SURVEY**