



Action Plan to HomeOwnership

Date of Counseling Session: _____

I agree to make reasonable efforts to pursue homeownership as outlined below, and to accomplish the steps and goals by the dates indicated. If my circumstances change, or for any reason I am unable to accomplish my goals, I will contact the HomeOwnership Manager.

Participant (Print Name)

HomeOwnership Manager (Print Name)

Participant (Signature)

HomeOwnership Manager (Signature)

Phone

E-mail

IN PREPERATION FOR HOMEOWNERSHIP I WILL:

- Maintain or seek continuous living-wage employment.
- Work an average of at least 30 hours a week.
- Identify and address any credit issues.
- Complete Homeownership and Financial Literacy Classes.
- Develop and submit a monthly spending plan.
- Continue or start a savings account to cover homeownership expenses.
- Seek loan approval from a financial institution.
- Seek and purchase my primary residence.

Goal #1

I will reach this goal by completing the following

By _____ (Date)

1) _____

2) _____

3) _____

4) _____

Goal #2

I will reach this goal by completing the following:

By _____ (Date)

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Goal #3

I will reach this goal by completing the following:

By _____ (Date)

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Goal #4

I will reach this goal by completing the following:

By _____ (Date)

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Next Appointment: _____

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