

Foundational Community Supports Moving Attestation

Washington | Medicaid

Those interested in using Foundational Community Supports (FCS) Transition Assistance Program (TAP) funds must be moving in addition to meeting other TAP criteria listed in the FCS TAP Quick Reference Guide.

I attest that I am a duly authorized FCS intake worker and that I have followed my agency's policies and procedures to establish a housing transition for the purposes of the FCS Transition Assistance Program. I have determined the enrollee is moving to new housing by one of the following criteria:	
☐ A written and signed attestation by an FCS worker/provider☐ The enrollee's signed attestation	
Provider attestation	
I attest that is making a housing transition. (enrollee name*)	
*Signature of authorized FCS worker:	*Date:
*Provider agency name:	*Time:
I,, am making a housing transition. (enrollee name*)	
*Signature:	
*Time:	*Date:

^{*} Indicates a required field