



U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT  
WASHINGTON, DC 20410-5000

OFFICE OF PUBLIC AND INDIAN HOUSING

**Registration Form for  
Final Rule Effective January 31, 2010: Refinement of Income and Rent Rule and  
Effective Use of the Enterprise Income Verification (EIV) System Training  
For Administrators of Public Housing and Housing Choice Voucher Programs**

**When:** Thursday, January 28, 2010  
**Time:** 1:00PM to 5:00PM, EST

**Where:** HUD Headquarters  
451 7<sup>th</sup> Street, SW  
Brooke-Mondale Auditorium – Salon A & B  
Washington, DC 20410

**Registration Deadline to Reserve Your Seat in Washington, DC: Tuesday, January 19, 2010, at 5:00PM, EST**

Seating is limited. Those individuals who wish to attend this “live” classroom training in WASHINGTON, DC, should complete and submit this form no later than **Tuesday, January 19, 2010, at 5:00PM, EST**, to reserve a seat. First priority will be given to PHA staff. This training is intended for PHAs and PHA-hired management agents which administer the Public Housing or Housing Choice Voucher program and tenants of these programs.

You will receive an e-mail to confirm your registration for this training session. You will receive a **Certificate of Completion** for this training at the conclusion of the training session. Email completed registration form to [PIH.RHIIP.TA@hud.gov](mailto:PIH.RHIIP.TA@hud.gov).

**DO NOT COMPLETE THIS FORM IF YOU WILL VIEW THE TRAINING VIA WEBCAST/SATELLITE.**

*Please be sure to type all information correctly. Handwritten, scanned and faxed forms cannot be processed.*

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|--|--|-------------------------|--|
| <b>PHA Code</b>  |  | <b>Telephone Number</b> |  |
| <b>Email Address</b>   |  |                         |  |
| <b>Agency Name</b>   |  |                         |  |
| <b>Mailing Address 1</b>   |  |                         |  |
| <b>Mailing Address 2</b>   |  |                         |  |
| <b>City, State, Zip Code</b>   |  |                         |  |
| <b>Reserve a seat for up to 10 people. Enter name to be printed on Certificate of Completion.</b>              |  |                         |  |
| <b>List name as you want it to appear on the Certificate of Completion (Do not include Ms./Miss./Mrs./Mr.)</b> |  |                         |  |
| <b>1.</b>  |  |                         |  |
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| <b>9.</b>  |  |                         |  |
| <b>10.</b>   |  |                         |  |

*This is a HUD-sponsored training session. HUD does not charge a fee to attend this training. Transportation, parking, and other expenses are the responsibility of the individual or PHA. Do not make travel arrangements until you have received your confirmation email. For additional information, send an email to: [PIH.RHIIP.TA@HUD.GOV](mailto:PIH.RHIIP.TA@HUD.GOV).*