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

OFFICE OF PUBLIC AND INDIAN HOUSING
REAL ESTATE ASSESSMENT CENTER

Training Evaluation & Request for Certificate of Completion Form for Security Awareness, Initial and/or Updated Enterprise Income Verification (EIV) System Training

Webcast Air Date: September 24, 2010

Webcast Title: Initial Enterprise Income Verification (EIV) System 9.1.1

If you have viewed the Security Awareness, Initial, and/or Updated EIV System training webcast, and would like to receive a **Certificate of Completion**, complete this form and email it to: PIH.RHIIP.TA@HUD.GOV. The last day to request a certificate for this training session is June 30, 2011.

Certificates are available for **only** Public Housing Agencies (PHAs), PHA-hired Management Agents that administer a PIH rental assistance program, and HUD staff.

Upon successful processing of this request form, you will receive an email confirmation of the anticipated delivery date of certificate(s). Do **not** submit duplicate requests.

Select one response to each question.

1. Yes☐ No☐ Have you watched or participated in EIV training prior to today?
2. Yes☐ No☐ Do you have access to the EIV system?
3. Yes☐ No☐ Did you find today's training beneficial?
4. Yes☐ No☐ Was the length of time for this training too short?
5. Yes☐ No☐ Was the trainer knowledgeable about the subject?
6. Yes☐ No☐ Did you ask questions during or after participating in the training?
7. Yes☐ No☐ If you answered **Yes** to question 6, did the trainer answer your question(s)?

If you have any comments/suggestions that you wish to share with HUD please provide below:

Please be sure to type all information correctly. List only one mailing address. The below information will be printed on a mailing label to be used for mailing your certificates. The certificates will be mailed to the attention of the first person listed below (# 1). Do not include names, "same as above", "none" or "Attention:" on the mailing address lines.

HUD Staff Only: list HUD00 in the PHA Code field.

Handwritten, scanned, faxed, mailed, or incomplete forms will not be processed!			
PHA Code		**Telephone Number**	
Agency Name			
Mailing Address 1			
Mailing Address 2			
City, State, Zip Code			
Date of Completion	Select month, day, and year staff completed the training: September 24 2010		
Request certificate for a maximum of 10 people. Please consolidate your agency's request for certificates			
List name as you want it to appear on the Certificate (Do not include Ms./Miss./Mrs./Mr. or Titles) If you include your middle initial, be sure to include a period after the initial.			
Maximum of 35 characters. Check the spelling of all names before submitting to HUD!			
1.			
2.			
3.			
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10.			

Reset Form

Submit Form to HUD