



Employee Name: \_\_\_\_\_  
Property Name: \_\_\_\_\_

WASS ID: \_\_\_\_\_  
Date: \_\_\_\_\_

ACKNOWLEDGEMENT

1 By signing this form, I acknowledge that I have read and understand CCH Use and Security Policies and Procedures and received actual copies or links to information of the following (if checked):

- 2 Checklist:
- CCH EIV Use and Security Policies and Procedures
  - EIV Websites and Guidance
    - EIV Website for MF Housing
    - EIV Training Outreach
    - RHII Website
    - HUD Handbook 4350.3
    - Rent and Income Quality Control Guide
    - EIV User Access Authorization Form
    - EIV and You Brochure
  - HUD Secure Systems Access Guide
  - EIV Security Binder, Checklist, & Configuration
  - EIV Rules of Behavior
  - EIV Security Awareness Training

3 Signatures:

_____	_____	_____
User/Staff (Print Name)	Signature	Date
_____	_____	_____
Supervisor (Print Name)	Signature	Date
_____	_____	_____
EIV Coordinator (Print Name)	Signature	Date
_____	_____	_____
WASS Coordinator (Print Name)	Signature	Date