



## SECTION 3 RESIDENT CERTIFICATION

### San Diego Housing Commission

Dear San Diego Resident:

The San Diego Housing Commission (SDHC) invites you to self-certify as a Section 3 Resident, which will provide you with additional job-seeking benefits, such as placement on a registry used by SDHC partners and notification of employment opportunities with SDHC.

Section 3 of the Housing and Urban Development Act of 1968 was established to foster local economic development. It requires that recipients of certain U.S. Department of Housing and Urban Development (HUD) financial assistance, to the greatest extent feasible, provide job training, employment, contracting, and other economic opportunities to low- and very low-income persons and to business concerns which provide economic opportunities to low- and very low-income persons. Section 3 regulations are implemented in Title 24 of the Code of Federal Regulations Part 135.

#### Who is a Section 3 Resident?

- **Resident of public housing who resides in the County of San Diego; or**
- **Resident of the County of San Diego who is low- or very-low income:**

2018 FAMILY INCOME LIMITS								
FAMILY Size	1	2	3	4	5	6	7	8
Maximum Gross Annual Family Income	\$54,500	\$62,300	\$70,100	\$77,850	\$84,100	\$90,350	\$96,550	\$102,800

Please complete the enclosed application. If you have any questions or concerns, please contact the Section 3/EOC Unit at (619) 578-7579. Submit the completed application to either of the following:

Program Analyst  
[section3@sdhc.org](mailto:section3@sdhc.org)

San Diego Housing Commission  
 Section 3/EOC Unit  
 1122 Broadway, Ste. 300  
 San Diego, CA 92101



## SECTION 3 RESIDENT CERTIFICATION FORM

**Instructions:** To certify as a Section 3 Resident and to be referred for employment and/or occupational training opportunities, complete the entire application. To certify as a Section 3 Resident only, complete sections 1 and 8. All applicants must sign and date the form.

<b>1. CONTACT INFORMATION AND CERTIFICATION ELIGIBILITY</b>				
<p style="color: red; font-weight: bold;">You must identify under which criteria you qualify as a Section 3 Resident: (select only one)</p> <ul style="list-style-type: none"> <li>• <b>A Public Housing Resident</b> <input type="checkbox"/></li> <li>• <b>Low Income Resident of San Diego County</b> <input type="checkbox"/></li> <li>• <b>Receive Section 8 Voucher from SDHC</b> <input type="checkbox"/></li> </ul>		<p><b>Name:</b> _____</p> <p><b>Residential Address (no P.O. Box):</b> _____</p> <p><b>City:</b> _____ <b>State:</b> _____ <b>Zip:</b> _____</p> <p><b>Telephone Number:</b> _____</p> <p><b>Email:</b> _____</p> <p><i>Note: In order to receive notification of employment and training opportunities, applicant <u>must</u> provide an email address.</i></p> <p><i>If you are an individual who lacks a fixed, regular, and adequate nighttime residence, please check here</i> <input type="checkbox"/></p>		
<b>2. EDUCATION (Check all that apply)</b>				
GED <input type="checkbox"/>	High School Diploma <input type="checkbox"/>	Post High School <input type="checkbox"/>	Associate Degree <input type="checkbox"/>	Trade/Training <input type="checkbox"/>
College Credits <input type="checkbox"/>	Professional License <input type="checkbox"/>	Higher Education <input type="checkbox"/>	Bachelor Degree <input type="checkbox"/>	Certificate <input type="checkbox"/>
Use this section to provide any additional information regarding your education:				
<b>3. WORK EXPERIENCE</b>				
Identify all work experience for the last 10 years AND the number of years of experience in each category.				
# of Years	# of Years	# of Years	# of Years	# of Years
Management/Supervisor _____	IT Support _____	Administrative _____	Sales Clerk _____	Apprentice (construction) _____
Accounting _____	Computer Programming _____	Construction Laborer _____	Cashier _____	Maintenance _____
Education _____	Medical Assistance _____	Janitorial/Cleaning _____	Insurance _____	Mechanic _____
Counseling _____	Bookkeeping _____	Warehouse/Facilities _____	Real Estate _____	Machine _____
Printing Trades _____	Gardener/Landscaper _____	Waiter/Waitress _____	Electrician _____	Operator _____
		Truck/Tractor Driver _____	Painter _____	Carpenter _____
		Plumber _____		



			Metal Worker _____
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Use this section to provide any additional information regarding your work experience:

**4. SKILLS**

List any skills with specialized equipment, machinery or tools:

**5. COMPUTER SKILLS**

Rate your computer skill level for each of the following. Write the letter “B” for beginner, “I” for intermediate, or “A” for advanced. Write “N/A” if not applicable.

Skill Level	Skill Level	Skill Level	Skill Level	Skill Level
Microsoft Word _____	Microsoft Publisher _____	PowerPoint _____	Microsoft Excel _____	Microsoft Outlook _____
Microsoft Access _____	Internet Research _____	Web Design _____	Web Programming _____	Network Admin. _____
				Typing (_____ wpm)

**6. TRAINING**

Identify any training that you would like to receive.

Electrical <input type="checkbox"/>	Carpentry <input type="checkbox"/>	Cement/Masonry <input type="checkbox"/>	Flooring <input type="checkbox"/>	Building Maintenance <input type="checkbox"/>
Machining <input type="checkbox"/>	Fencing <input type="checkbox"/>	Plumbing <input type="checkbox"/>	Landscaping <input type="checkbox"/>	IT Support <input type="checkbox"/>
Bricklaying <input type="checkbox"/>	Plastering <input type="checkbox"/>	Demolition <input type="checkbox"/>	Computer <input type="checkbox"/>	Marketing <input type="checkbox"/>
Painting <input type="checkbox"/>	Glass/Glazing <input type="checkbox"/>	HVAC <input type="checkbox"/>	Accounting/ Bookkeeping <input type="checkbox"/>	Mechanical Repair <input type="checkbox"/>
Roofing <input type="checkbox"/>	Drywall <input type="checkbox"/>	Iron Works <input type="checkbox"/>	Payroll <input type="checkbox"/>	Janitorial <input type="checkbox"/>
		Solar Installation <input type="checkbox"/>		Administrative <input type="checkbox"/>

**7. PLEASE ANSWER THE FOLLOWING:**

	Yes	No
Have you ever received any type of assistance from SDHC’s Achievement Academy?	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently a member of any union? If yes, please describe.	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently employed? If yes, please indicate whether part-time or full-time.	<input type="checkbox"/>	<input type="checkbox"/>
Are you a Youth Build participant?	<input type="checkbox"/>	<input type="checkbox"/>
Are you 18+ years of age?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a felony within the last 10 years?	<input type="checkbox"/>	<input type="checkbox"/>
Are you willing to take a drug screening?	<input type="checkbox"/>	<input type="checkbox"/>



Are you able to lift 50 lbs. at a time with frequent lifting or carrying of objects up to 25 lbs.?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have 10 years of verifiable employment or school history?	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
Are you bilingual? If yes, please <u>indicate</u> which languages you speak fluently.	<input type="checkbox"/>	<input type="checkbox"/>
Do you possess a valid driver's license?	<input type="checkbox"/>	<input type="checkbox"/>
Do you possess a State ID?	<input type="checkbox"/>	<input type="checkbox"/>
How did you learn about the Section 3 certification program?		
<b>RELEASE OF INFORMATION:</b> Do you authorize the San Diego Housing Commission to release this information to businesses that are seeking certified Section 3 Residents for employment and/or training opportunities?	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>
<p>I, _____, agree to provide the San Diego Housing Commission with documentation verifying my Section 3 eligibility, if requested.</p> <p>I, _____ am a resident of the County of San Diego and qualify as a low or very low income person as defined in the Section 3 Regulations. I hereby certify and declare under penalty of perjury under the laws of the United States and the State of California that the statements made in this Section 3 Resident Certification Form and any and all documents attached hereto, are true and correct.</p> <p><b>Signature:</b> _____</p> <p><b>Date:</b> _____</p>		

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The following information is optional and will only be used for statistical purposes:

Gender:  Male  Female

Race/Ethnicity:  Caucasian  African American  Hispanic/Latino  Asian/Pacific Islander

Native American  Other, please identify: \_\_\_\_\_