

## SECTION 3 WORKER CERTIFICATION FORM

## Dear San Diego County Resident:

The San Diego Housing Commission (SDHC) invites you to self-certify as a Section 3 Worker which will provide you with job-seeking benefits such as placement on a registry used by SDHC partners, and notification of employment opportunities with SDHC. The information collected on this form is used to assess SDHC's compliance with Section 3 of the Housing and Urban Development (HUD) Act of 1968 which requires that economic opportunities, most importantly employment, generated by certain HUD financial assistance shall be directed to low- and very low-income persons, particularly those who are recipients of government assistance for housing or residents of the community in which the federal assistance is spent. Section 3 regulations are implemented in Title 24 of the Code of Federal Regulations Part 75. If you qualify as a Section 3 Worker, please self-certify by completing this form.

## **Eligibility Requirements**

To certify as a Section 3 Worker, you must reside in the County of San Diego and meet one of the following requirements:
$\square$ I am a public housing resident.
☐ I am an SDHC Section 8 voucher recipient.
☐ I am a YouthBuild program participant.
☐ I am a low- or very low-income person per the HUD Income Limits.
2024 HUD INCOME UNITS

Please complete the enclosed certification form. All Section 3 Workers must sign and date the form. If you have any questions or concerns, please contact the Section 3 Unit at (619) 578-7579. Submit the completed certification form to either of the following:

\$84,900

Program Analyst section3@sdhc.org

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



## **SECTION 3 WORKER CERTIFICATION FORM**

**Instructions:** To certify as a Section 3 Worker and to be referred for employment and/or occupational training opportunities, complete the entire Section 3 Worker Certification Form. If necessary, submit responses on additional sheets of paper. All Section 3 Workers must sign and date the form.

1. CON	ΓACT INF	ORMATION AND CE	RTIFICATION ELIGIB	BILITY				
		Name:						
You must identify under which criteria you qualify as a Section 3 Worker: (Select only one)		Residential Add	Residential Address (no P.O. Box):					
(00.000	,,	City:		State:	_Zip:			
☐ I am a public	housing reside	ent. Telephone Num	Telephone Number:					
☐ I am an SDHe voucher recipi		Email:	Email:					
☐ I am a YouthB participant.	uild program		<b>Note:</b> In order to receive notification of employment and training opportunities, Section 3 Worker <u>must</u> provide an email address.					
☐ I am a low- or income person Income Limits	per the HUD		If you are an individual who lacks a fixed, regular, and adequate nighttime residence, please check here					
2. EDUC	ATION (Ch	neck all that apply)						
GED High School Diploma College Credits Professional License		gh School Diploma pfessional License	Post High School Higher Education	Associate Degree Bachelor Degree	Trade/Training Certificate			
Use this section	to provide a	any additional information	regarding your education:					
	EXPERIEN							
Identify all wor			the number of years of expe		T			
Management/	# of Years	# of Years	-	# of Years	# of Years			
Supervisor Accounting Education		IT Support  Computer  Programming	Administrative Construction Laborer Janitorial/Cleaning	Sales Clerk Cashier Insurance	Apprentice (construction)  Maintenance			
Counseling Printing Trades		Medical Assistance Bookkeeping Gardener/ Landscaper	Warehouse/Facilities Waiter/Waitress Truck/Tractor Driver	Insurance Real Estate Electrician Painter	Mechanic Machine Operator			
		Landscaper	Plumber	Metal Worker	Carpenter			



Use this section to pa	rovide any additional i	information regarding you	work experience:	
4. SKILLS				
List any skills with s	specialized equipment,	machinery or tools:		
		the following. Write the lea	tter "B" for beginner, "I" for intern	mediate, or "A" for
Microsoft Word	Microsoft Access	Microsoft Publisher	Internet Research Powerl	Point
Web Design	Microsoft Excel	Web Programming	Microsoft Outlook Network	Admin.
Typing (wpm)				
6. TRAINING				
Identify any training	ng that you would like	e to receive.	T	Т
☐ Electrical	☐ Carpentry	☐ Cement/Masonry		☐ Building Maintenance
☐ Machining	☐ Plastering	☐ Plumbing	☐ Landscaping	☐ IT Support
☐ Bricklaying	☐ Glass/Glazing	☐ Demolition	☐ Computer	☐ Marketing
☐ Painting	☐ Drywall	□ HVAC	☐ Accounting/	☐ Mechanical Repair
	☐ Fencing	☐ Iron Works	☐ Bookkeeping	☐ Janitorial
		☐ Solar Installation		☐ Administrative
7. PLEASE AN	SWER THE FOLLO	DWING:	Yes	No
Have you ever recei Achievement Acade	ved any type of assistemy?	ance from SDHC's		
Are you currently a	member of any union	? If yes, please describe.		
Are you currently employed? If yes, please indicate whether part-time or full-time: <b>Full-Time</b> □ OR <b>Part-Time</b> □				
Are you 18+ years of	of age?			
Have you ever been	convicted of a felony	within the last 10 years?		
Are you willing to t	ake a drug screening?			



Are you able to li	ift 50 lbs. at a time with fre	equent lifting o	or carrying of	Yes	No
objects up to 25 l					
Do you have 10 years of verifiable employment or school history?					
Are you bilingual?	If yes, please indicate which	language(s) yo	u speak fluently:		
☐ Spanish ☐ Chi	nese   Vietnamese   Tag	alog   Other:			
D	1:11: 11: 0				
Do you possess a	valid driver's license?				
Do you possess a	State ID?				
Do you possess a	But ID.				
How did you lear	n about the Section 3 certi	fication progra	am?   SDHC	☐ Employer ☐ Famil	ly/Friend   Internet Search
					•
				T	
	<b>FORMATION:</b> Do you auti			Yes	No
Commission to release the above information to businesses that are seeking certified Section 3 Workers for employment and/or training opportunities?					
	words for emproyment unit	a or training opp			
defined in the HU States and the Sta	an SDHC Section 8 voucher D Section 3 Regulations. I l te of California that the sta nal response, are true and co	r recipient, a Y nereby certify a tements made	outhBuild partice and declare unde	r penalty of perjury und	low-income person, as der the laws of the United
Signature:	Signature:Date:				
The follow	ving information is option	al and will on	ly be used for s	tatistical purposes:	
Gender:	Male Female	Transgender 🗌			
Race:	$1 - $ White $\square$		2 – Black/Africa	n American	
	3 – American Indian/Alasl	ka Native 🗌	4 – Asian/Pacific	c Islander $\square$	
Ethnicity:	1- Hispanic 2 - Not H	ispanic 🗌			
		FOR ADMIN	ISTRATIVE USE	ONLY	
	Worker? Yes No				
	Section 3 Worker? Yes No No	-40 \$7	1		
	Section 3 Worker? Yes No hired as a result of a Section 3 projection of company?	ct? Yes No Contract N	]    umber/Proiect Name	Hire date?	