# **SECTION 3 WORKER APPLICATION**A 1968 HOUSING AND URBAN DEVELOPMENT ACT





	DATE
Applicant Name:	
Current Home Address:	
Phone Number:	Email Address:
Job Skills/Trades: Select one	Other:
Referred By:	

#### ALL PAGES OF THIS APPLICATION MUST BE SUBMITTED

#### 2023 HUD Income Limits for Houston and Surrounding Areas

Household	30% of Median Extremely Low-Income		50% of Median Very Low-Income		80% of Median Low Income	
Size	Annual Income	Monthly Income	Annual Income	Monthly Income	Annual Income	Monthly Income
1-person	\$19,600	\$1,633	\$32,650	\$2,721	\$52,200	\$4,350
2-person	\$22,400	\$1,867	\$37,300	\$3,108	\$59,650	\$4,971
3-person	\$25,200	\$2,100	\$41,950	\$3,496	\$67,100	\$5,592
4-person	\$30,000	\$2,500	\$46,600	\$3,883	\$74,550	\$6,213
5-person	\$35,140	\$2,928	\$50,350	\$4,196	\$80,550	\$6,713
6-person	\$40,280	\$3,357	\$54,100	\$4,508	\$86,500	\$7,208
7-person	\$45,420	\$3,785	\$57,800	\$4,817	\$92,450	\$7,704
8-person	\$50,560	\$4,213	\$61,550	\$5,192	\$98,450	\$8,204

ALLOW 5-10 BUSINESS DAYS FOR PROCESSING.

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PART	1. SECTION 3 WORI	KER QUALIFYING STATI	EMENT	
You mu	st qualify under one of th	ne following statements to qua	ualify as a Section 3 Worker. Please select only <b>ONE.</b>	
Ql		s or current calendar year is be under Parts 2 and 3 below and	below HUD income limits. See above for HUD Income Limit Chart. Follow and d Page 3.	
Q2	Employed by a Section	3 Business Concern. Follow ar	and complete instructions under Parts 2 and 4 below and Page 3.	
Q3	Participant in YouthBui	ld program. Follow and comp	plete instructions under Parts 2 and 5 below and Page 3.	
Q4	At any time during the See above for HUD Inco	last five years my annual hous ome Limit Chart. Follow and co	usehold income was zero or did NOT exceed the 80% Median HUD Income Limi complete instructions under Parts 2 and 6 below and Page 3.	
PART	2. SUPPORTING DO	OCUMENTATION FOR A	ALL APPLICANTS	
Each ap	plicant must submit the	following documents:		
	Identification one (1) of the following:	Oriver's License	State Identification Card Passport	
	Residency one (1) of the following:	Lease Agreement Utility Bill	nt/ Reference Letter from Other Head of Household	
O Su	oplement to Income Ce	rtification Form (required)		
PART	3. SUPPORTING DO	OCUMENTATION FOR Q	ÓI	
	elected Q1 qualifying stat ate in public assistance p		st submit the following documents if you receive either public housing and/or	
Public I Resider		Lease Agreement	Federal, State or Local Public Assistance Program  Voucher or Award Letter	
PART	4. SUPPORTING DO	DCUMENTATION FOR C	Q2	
If you se	elected Q2 qualifying stat	ement under Part 1, you must	st submit the following documents:	
1. 2023 H	Household Income Self-G	Certification Form	2. 2023 Zero Household Income Self-Certification Form	
3. Section 3 Business Concern Name and Date of Employment:				
PART 5. SUPPORTING DOCUMENTATION FOR Q3				
If you selected Q3 qualifying statement under Part 1, you must submit the following documents:				
1. 2023 Household Income Self-Certification Form 2. YouthBuild Participant Letter				
PART 6. SUPPORTING DOCUMENTATION FOR Q4				
If you selected Q4 qualifying statement under Part 1, you must submit the following documents:				
1. 2023 H	Household Income Self-	Certification Form	2. 2018-2022 Household Income Self-Certification Form	

### **SECTION 3 WORKER APPLICATION**2023 ZERO HOUSEHOLD INCOME SELF-CERTIFICATION





#### 2023 Annual HUD Income Limits - 80% Median

Household Size	1	2	3	4	5	6	7	8
Low Income	\$52,200	\$59,650	\$67,100	\$74,550	\$80,550	\$86,500	\$92,450	\$98,450
Low income								

#### LIST ALL MEMBERS OF HOUSEHOLD, REGARDLESS OF INCOME OR AGE.

PART 1. HOUSEHOLD COMPOSITION					
	Last Name	First Name M.I.	Relationship to Head of Household	Date of Birth	Last 4-digits of SSN
1					
2					
3					
4					
5					
PART 2. GF	ROSS (BEFORE TAXES) H	OUSEHOLD ANNUAL IN	ICOME		
	Employment & Wages	Social Security/Pensions	Public Assistance	Other I	ncome
1					
2					
3					
4					
5					
	\$				

#### PART 3. HOUSEHOLD CERTIFICATION & SIGNATURE

- The information on this form will be used to determine maximum income eligibility. I/we have provided for each person(s) set forth in Part I acceptable verification of current anticipated annual income.
- Under penalties of perjury, I/we certify that the information presented in this Certification is true and accurate to the best of my/our knowledge and belief.
- The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of certification.

Print Name	Signature	Date

### **SECTION 3 WORKER APPLICATION** 2023 ZERO HOUSEHOLD INCOME SELF-CERTIFICATION





	Print Name	Signature	Date
he be	est of my knowledge. The undersigr	e information presented in this certific ned further understands that providin ding or incomplete information may re	g false representations herein
		ny, child support, or gifts received from resources (Avon, Mary Kay, Shaklee, etc e.	
	Unemployment or disability payment public assistance income;		pensions, or death benefits,
	Rental income from real or personal Interest or dividends from assets;	al properties; s, insurance policies, retirement funds,	noncione or dooth honofite
	Wages from employment (including Income from operation of a busine	ng commissions, tips, bonuses, fees, etc ss;	:.);
	eby certify that I currently do not inc f the following sources:	dividually, nor does any member of my	household, receive income from

### **SECTION 3 WORKER APPLICATION**2023 ZERO HOUSEHOLD INCOME SELF-CERTIFICATION





If you are qualifying as a Section 3 Worker based on your household income from the past five years, check all boxes that applied to you and your household during 2018-2022.

2018		2019	2020	2021	2022
O At or	e point in the past	five, my household	l income was zero.		
	e point in the past or local public assi		public housing resident	and/or participated in	า Federal,
	e point in the past ne Limit.	five years, my hous	sehold income did NOT	exceed the 80% Med	ian HUD
O At or	e point in the past	five years, I was un	employed.		
O At or	e point in the past	five years, I was ho	meless.		
o the bes nerein cor	t of my knowledge	e. The undersigned fraud. False, mislea	mation presented in th further understands th ding or incomplete inf	nat providing false rep	presentations
	Print Name		Signature		Date

### SECTION 3 WORKER APPLICATION







1. What is your age?			
18-24 years old	25-34 years old	35-44 years ol	d
45-54 years old	Over 55		
2. What is your gender?			
O Male	Female	O Prefer not to s	say
3. What is your ethnicity?			
O White	Hispanic or Latino	Black or Africation	an American
Native American or American Indian	Asian/Pacific Islan		
4. What is the highest degree or lev	vel of school you have o	ompleted?	
	ligh school degree or equivalent	Associate's degree (e.g. AA, AS)	Bachelor's degree (e.g. BA, BS)
	Doctorate e.g. PhD, EdD)	Other (specify)	
5. What is your current employmen	t status?		
O Full time	O Part time	Ounemployed	
Student	Retired	Other (specify)	
6. Are you a Veteran?			
Yes	○ No		
7. Do you have disability?			
○ Yes	○ No		
8. I agree to having my information	published in the City of	f Houston's Section 3 W	orker online directory.
○ Yes	○ No		
Print Name	Signa	ture	Date