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





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

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

### 2025 Houston/The Woodlands/Sugar Land Region HUD Maximum Annual Household Income Limits\*

Household Size	80% Area Median Income (AMI)	120% Area Median Income (AMI)
1-person	\$56,650	\$84,950
2-person	\$64,750	\$97,050
3-person	\$72,850	\$109,200
4-person	\$80,900	\$121,300
5-person	\$87,400	\$131,050
6-person	\$93,850	\$140,750
7-person	\$100,350	\$150,450
8-person	\$106,800	\$160,150

<sup>\*</sup>Effective as of April 1, 2025. Household income limits are subject to annual changes.

ALLOW 5-10 BUSINESS DAYS FOR PROCESSING.

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





#### PART 1. SECTION 3 WORKER QUALIFYING STATEMENT

You must qualify under one of the following statements to qualify as a Section 3 Worker. Please select only ONE.

- Income for the previous or current calendar year is below HUD income limits. See above for HUD Income Limit Chart. Follow and complete instructions under Parts 2 and 3 below and Page 3.
- Q2 | Employed by a Section 3 Business Concern. Follow and complete instructions under Parts 2 and 4 below and Page 3.
- Q3 Participant in YouthBuild program. Follow and complete instructions under Parts 2 and 5 below and Page 3.
- At any time during the last five years my annual household income was zero or did NOT exceed the 80% Median HUD Income Limit. See above for HUD Income Limit Chart. Follow and complete instructions under Parts 2 and 6 below and Page 3.

#### PART 2. SUPPORTING DOCUMENTATION FOR ALL APPLICANTS

Each applicant must submit the following documents:

Proof of Identification

Provide one (1) of the following:

Driver's License

State Identification Card

Passport

**Proof of Residency** 

Provide one (1) of the following:

Lease Agreement/ Utility Bill Reference Letter from Head of Household

Other

Supplement to Income Certification Form (required)

#### PART 3. SUPPORTING DOCUMENTATION FOR Q1

If you selected Q1 qualifying statement under Part 1, you must submit the following documents if you receive either public housing and/or participate in public assistance program:

Public Housing Resident

Lease Agreement Federal, State or Local Public Assistance Program

Voucher or Award Letter

#### PART 4. SUPPORTING DOCUMENTATION FOR Q2

If you selected Q2 qualifying statement under Part 1, you must submit the following documents:

1. 2024 Household Income Self-Certification Form

2. 2024 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. 2024 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. 2024 Household Income Self-Certification Form

2. 2019-2023 Household Income Self-Certification Form

### **SECTION 3 WORKER APPLICATION**2024 ZERO HOUSEHOLD INCOME SELF-CERTIFICATION





#### 2024 Annual HUD Income Limits - 80% Median

Household Size	1	2	3	4	5	6	7	8
	\$53,000	\$60,600	\$68,150	\$75,700	\$81,800	\$87,850	\$93,900	\$99,950
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	NCOME				
	Employment & Wages	Social Security/Pensions	Public Assistance	Other I	ncome		
1							
2							
3							
4							
5							
Total Gross Household Annual Income							

#### 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 2024 ZERO HOUSEHOLD INCOME SELF-CERTIFICATION





I hereby certify that I currently do not individually, nor does any member of my household, receive income from any of the following sources:

Wages from employment (including commissions, tips, bonuses, fees, etc.);

Income from operation of a business;

Rental income from real or personal properties;

Interest or dividends from assets;

Social Security payments, annuities, insurance policies, retirement funds, pensions, or death benefits;

Unemployment or disability payments;

Public assistance income;

Periodic allowances such as alimony, child support, or gifts received from persons not living in household;

Sales revenue from self-employed resources (Avon, Mary Kay, Shaklee, etc.);

Any other source not named above.

Print Name

Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. 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 my Section 3 certification.

Signature

Date

### SECTION 3 WORKER APPLICATION 2024 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.

2019	2020	2021	2022	2023

At one point in the past five, my household income was zero.

At one point in the past five years, I was a public housing resident and/or participated in Federal, state or local public assistance programs.

At one point in the past five years, my household income did NOT exceed the 80% Median HUD Income Limit.

At one point in the past five years, I was unemployed.

At one point in the past five years, I was homeless.

Under penalty of perjury, I certify that the information presented in this certification is true and accurate
to the best of my knowledge. 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 my Section 3 certification.

Print Name	Signature	Date

# SECTION 3 WORKER APPLICATION QUESTIONNAIRE





						Tanis V	
1. What is	your age?						
	18-24 years old		25-34 years old	25-34 years old		35-44 years old	
	45-54 years old		Over 55				
2. What is	s your gender?						
	Male		Female			Prefer not to say	
3. What is	s your ethnicity?						
	White		Hispanic or Latino	0		Black or African	American
	Native American or American Indian		Asian/Pacific Islander O		Other (specify)		
4. What is	s the highest degree or	level o	of school you have	comp	oleted	?	
	Less than a high school diploma	_	ı school degree quivalent		Associa e.g. A <i>l</i>	ate's degree A, AS)	Bachelor's degree (e.g. BA, BS)
	Master's degree (e.g. MA, MS, MEd)		octorate Other g. PhD, EdD) (specify		y)		
5. What is	s your current employm	ent st	atus?				
	Full time		Part time			Unemployed	
	Student		Retired			Other (specify)	
6. Are you	ı a Veteran?						
	Yes		No				
7. Do you	have disability?						
	Yes		No				
8. I agree	to having my informati	on pu	blished in the City	of Ho	uston	's Section 3 Work	er online directory.
	Yes	·	No				-
	Print Name		Sign	nature			Date