

FALL RIVER HOUSING AUTHORITY

Section 3 Resident Application

What is Section 3?

Section 3 is a provision of the Housing and Urban Development (HUD) Act of 1968 that helps foster local economic development, neighborhood economic improvement, and individual self-sufficiency. The Section 3 program requires that the Fall River Housing Authority (FRHA), to the greatest extent feasible, provide job training, employment, and contracting opportunities for low- or very-low income residents in connection with projects and activities in their neighborhoods. For instructions and more information see the FRHA Section 3 Program Guide attached.

Who are Section 3 residents?

Section 3 residents are:

- Public housing residents or HCVP participants (Section 8)
- Persons who live in Fall River and who have a household income that falls below HUD's income limits.(see chart below)
- Persons who do not reside in the city of Fall River are not eligible for the Section 3 program.
- Persons not eligible for Section 3 still have employment opportunities. The program is **optional** and does not bar you from future employment opportunities with the FRHA or other contractors/vendors. It's solely intended to provide the FRHA with a list of low income residents for potential job opportunities. Employment is not guaranteed.

Section 3 Resident Determination

1. I am am not a resident of the Fall River Housing Authority. If you are, please give the name of your public housing development. _____

2. I do do not receive assistance from a Fall River Housing Authority Housing Choice Voucher program (Section 8).

3. I am am not a resident of Fall River

4. Find your family size in the box below.

Is your family income equal to or less than the income listed below? YES NO

HUD Providence-Fall River MFI income Limits

1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
\$41,000	\$46,850	\$52,700	\$58,550	\$63,250	\$67,900	\$72,600	\$77,300

I have attached one of the following documents as proof of my status:

- Proof of residency (lease in a HUD or other federally assisted program).
- Proof of public assistance, e.g., Temporary Assistance to Needy Families (TANF) recipients, etc.
- Proof of participation in a HUD YOUTHBUILD program
- Proof of participation in a federally assisted program such as job training programs, etc.
- Proof of participation in a state or local assistance program, or other program that assists low- or very-low income persons.
- Resident Household Income Certification form. **(Please attach only for a resident who is not a public housing resident or not a recipient of a housing assistance program such as HCVP (Section 8))**

PRINT NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

SIGNATURE: _____ DATE: _____

Please submit this application to your development's main office or the Fall River Housing Authority's main office.

ATTN: FRHA Section 3 Application, 85 Morgan St, Fall River, MA 02721

Fax: 508-675-3591

Email: adam.gautie@fallriverha.org

Fall River Housing Authority

Section 3 Resident Household Income Certification

Any individual who is seeking to be certified as a Section 3 resident, and who is **not a public housing resident, or not in a federally assisted housing program, or not a recipient public assistance program** shall attest to their total current gross annual household income, and provide the name and date of birth of each household member. All additional household income earned by household members, excluding children under 18, and/or provided through public or private assistance, child support, bank or investment earnings must be included, where indicated below.

I, _____, (Individual's Full Name) DO SOLEMNLY SWEAR THAT THE INFORMATION I HAVE PROVIDED BELOW IS TRUE.

Number of family members who live in my household: _____.

My total current gross annual household income is: _____.

The source(s) of my total **annual** household income is/are:

	Head of Household	Spouse (if applicable)	Other Adult Members age 18 & over (if applicable)	Other Adult Members age 18 & over (if applicable)	Other Adult Members age 18 & over (if applicable)	Other Adult Members age 18 & over (if applicable)
Gross Earnings						
TANF						
Child Support						
Bank Income						
Other Income (list)						
1.						
2.						
3.						
4.						

PRINT NAME: _____

SIGNATURE: _____ DATE: _____

Fall River Housing Authority

Assessment of Experience and Skills for Participation in the Section 3 Program

- NO**, there is no one in my household interested in participating in training and employment under the FRHA's Section 3 Program
- YES**, a member of my household is interested in participating in training and employment under the FRHA's Section 3 Program. I am providing the following information for consideration:

1 **Name** _____

2 **Address** _____

3 **Age** (Please Check One)
 18 - 24 25 - 4 45 - 59 60+

5 **Do you have children/dependents living with you?** (Please Check One)
 Yes No

6 **If yes, please list children/dependents living with you and their ages**

	Name	Age		Name	Age
1	_____	_____	5	_____	_____
2	_____	_____	6	_____	_____
3	_____	_____	7	_____	_____
4	_____	_____	8	_____	_____

7 **Do you have a high school diploma or a GED?**
 Yes No

9 **What is the Major Source of Family Income?** (please check one)

- Salaries or wages earned from a job by persons in home
 Alimony, child support or other support from family outside of home
 Others (please specify) _____

Public assistance programs (check all that apply)

- AFDC
 Food stamps
 Medicaid
 Assisted Housing
 WIC

10 **What is your household annual income (all income from anyone in the household over 18 years of age)?**
\$ _____

11 **If you are not employed, how long has it been since you have had a full-time job?**

- 0-12 months over 6 years
 1-3 years never had a job
 4-6 years

12 **If you are not employed, what are the most serious problems or barriers preventing you from getting a job?** (Please rate your top problems 1-3)

- Drugs/alcohol's addiction Availability of child care
 Criminal conviction record Lack of educational requirements (i.e., High School diploma, GED)
 Poor employment record with job firings Lack of transportation
 Lack of work experience and job skills

Have you participated in any employment/training program (federal, state, local, or private) during the last twelve (12) months?

- Yes No

If your answer is yes, please check the ones which apply

- Employment training (JTPA, etc.) English As a Second Language
 Vocational education or rehabilitation Other (specify)
 Adult basic education (grade 0-8)

14 What type of work are you interested in? You may list more than one type.

15 What experience and/or skills do you currently have that will qualify you for your choice in work?

16 What experience and/or skills do you think you need for your choice in work?

17 How would you rate your...

Excellent

Good

Poor

- | | | | | |
|----|--|--------------------------|--------------------------|--------------------------|
| 1 | Writing skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | Reading skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | Speaking - oral communication skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | Math skills - Financial management skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | Listening skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 | Telephone skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 | Organizational skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | Leadership skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 | Sense of responsibility? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 | Self Motivation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 | Decision making skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 | Problem solving skills? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

18 Work History: Please list any work experiences with the most recent position first and continue through the jobs held whether they were on a full-time or part-time basis.

1 Title of Job: _____
Place of Employment: _____

Dates of Employment: _____
Primary Duties: _____

2 Title of Job: _____
Place of Employment: _____

Dates of Employment: _____
Primary Duties: _____

3 Title of Job: _____
Place of Employment: _____

Dates of Employment: _____
Primary Duties: _____

Fall River Housing Authority

Section 3 Program Guide and Instructions

What is Section 3?

Section 3 is a provision of the Housing and Urban Development (HUD) Act of 1968 that helps foster local economic development, neighborhood economic improvement, and individual self-sufficiency. The Section 3 program requires that recipients of certain HUD financial assistance, to the greatest extent feasible, provide job training, employment, and contracting opportunities for low- or very-low income residents in connection with projects and activities in their neighborhoods.

Who are Fall River Section 3 residents?

Fall River Section 3 residents are:

- Fall River public housing residents or HCVP (Section 8) recipients.
- Persons who live in the Fall River who have a household income that falls below HUD income limits for the Providence-Fall River metro area (see chart below)
- Persons who do not reside in Fall River or whose incomes are above the limits are not Section 3 eligible.

HUD Providence-Fall River MFI income Limits

1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
\$41,000	\$46,850	\$52,700	\$58,550	\$63,250	\$67,900	\$72,600	\$77,300

How does the Fall River Housing Authority Program Work?

When you submit your Section 3 application your name and contact information will be kept on file for employment opportunities. Each time a FRHA job becomes available the FRHA will review this list for potential candidates. This list will also be distributed to Section 3 business concerns that contract with the FRHA for employment opportunities within their respective businesses. Your information will remain on file until you no longer meet Section 3 eligibility. Once your application is submitted you may be contacted by the FRHA or a Section 3 business concern for employment and training opportunities. If you are not eligible for the Section 3 program the program is **optional** and does not bar you from future employment opportunities with the FRHA or other contractors/vendors. It's solely intended to provide the FRHA with a list of low income residents for potential job opportunities. Employment is not guaranteed.

What is a Section 3 business concern?

The Fall River Housing Authority may give preference in the award of a contract to a Section 3 business concern when the award is consistent with local and state procurement laws.

A Section 3 Business concern is a business that:

- Is 51 percent or more owned by Section 3 residents;
- Employs Section 3 residents for at least 30 percent of its full-time, permanent staff; or
- Provides evidence of a commitment to subcontract to Section 3 business concerns, 25 percent or more of the dollar amount of the awarded contract.

If you are interested in participating in the FRHA Section 3 program as a Section 3 business concern please submit the FRHA Section 3 business concern application.

How do you participate in the Section 3 program?

Please fill out the Section 3 resident application and submit to either your local FRHA development's main office or the Fall River Housing Authority's main office located at 85 Morgan St, Fall River, MA 02721

You can mail, fax, or email your application to:

ATTN: FRHA Section 3 application
Fall River Housing Authority
85 Morgan St
Fall River, MA 02721

Fax: 508-675-3591

Email: adam.gautie@fallriverha.org