

## Section 3 Resident Certification

**Eligibility for Preference:** A Section 3 resident seeking preference in training and employment shall certify, or submit evidence to the recipient, contractor, or agency, if requested, that the person qualifies as a Section 3 resident, as defined in 24 CFR 135.5.

Name \_\_\_\_\_

Home Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Alternate # \_\_\_\_\_ Email \_\_\_\_\_

Homeless:  Yes  No

**1. I meet the following criteria to be a Section 3 Resident:**

- I am a resident of public housing, OR
- I meet the income limits for the New Orleans Metropolitan Statistical Area listed below:

### INCOME CERIFICATION

Please find your household size below and check the box that best corresponds to your annual household income amount. Individuals who meet the income limits set forth below can qualify for Section 3 status for three years from the most recent qualifying year.

Household size	Year 2017	Year 2016	Year 2015
1 Person	<input type="checkbox"/> \$35,500 or below	<input type="checkbox"/> \$33,600 or below	<input type="checkbox"/> \$33,600 or below
2 People	<input type="checkbox"/> \$40,550 or below	<input type="checkbox"/> \$38,400 or below	<input type="checkbox"/> \$38,400 or below
3 People	<input type="checkbox"/> \$45,600 or below	<input type="checkbox"/> \$43,200 or below	<input type="checkbox"/> \$43,200 or below
4 People	<input type="checkbox"/> \$50,650 or below	<input type="checkbox"/> \$48,000 or below	<input type="checkbox"/> \$48,000 or below
5 People	<input type="checkbox"/> \$54,750 or below	<input type="checkbox"/> \$51,850 or below	<input type="checkbox"/> \$51,850 or below
6 People	<input type="checkbox"/> \$58,800 or below	<input type="checkbox"/> \$55,700 or below	<input type="checkbox"/> \$55,700 or below
7 People	<input type="checkbox"/> \$62,850 or below	<input type="checkbox"/> \$59,550 or below	<input type="checkbox"/> \$59,550 or below
8 People	<input type="checkbox"/> \$66,900 or below	<input type="checkbox"/> \$63,400 or below	<input type="checkbox"/> \$63,400 or below

**2. If requested, I am able to provide the following documentation as evidence of my Section 3 eligibility:**

- Copy of lease in a public housing program
- Copy of receipt or other evidence of participation in a public assistance program (ex. SNAP, WIC, Medicaid/LaCHIP, SSI...)
- Copy of household income tax return(s)
- Other evidence (ex. utility bill, W-2, 1099 form):  
\_\_\_\_\_

**3. I have the following job skills, certifications, or training:** \_\_\_\_\_

\_\_\_\_\_

I hereby certify under penalty of perjury that all information presented herein is true and correct to the best of my knowledge. I agree to allow this information to be shared with local and federal entities in an effort to increase my hiring potential.

Signature \_\_\_\_\_ Date \_\_\_\_\_



CITY OF NEW ORLEANS