



## SECTION 3 APPLICANT SELF-CERTIFICATION

Section 3 Worker who currently or when hired within the past five years fits at least one of the following:

- **Category 1 Worker:** Income for the previous or annualized calendar year is below the income eligibility guideline;
- **Category 2 Worker:** Employed by a Section 3 Business Concern;
- **Category 3 Worker:** A Youthbuild participant

**Income Eligibility Guideline\*** (individual income does not exceed the following amount):

Section 3 Worker	\$53,200
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\* HUD FMR Area: Cumberland, MD Published on May 1, 2026

Section 3 Targeted Worker fits at least one of the following:

- **Category 1 Worker:** A worker employed by a Section 3 Business Concern;
- **Category 2 Worker:** A worker currently or when hired within the past five years fits one of the following:
  - 1) Resident of public housing or receives Section 8 assisted housing;
  - 2) A Youthbuild participant

**Check all that apply:**

I meet the Income Eligibility Guidelines. *Please answer questions below:*

What is your individual annual income? \$ \_\_\_\_\_

- I am employed by a Section 3 Business Concern
- I am a public housing resident or Section 8 assisted housing resident
- I am a Youthbuild participant

I have attached the following documentation as evidence of my status. (Check One):

- Copy of current Public Housing Lease    Development Name: \_\_\_\_\_
- Drivers License or State ID
- Proof of residency at current address
- Copy of receipt of public assistance
- Copy of Evidence of participation in a public assistance program
- Other Evidence

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### Applicant Statement:

I understand that this form will be used to verify my residency and eligibility as a Section 3 person in consideration for employment. I certify that all of the information given above is true and correct. If found to be inaccurate, I understand that I may be disqualified as an applicant and/or a certified Section 3 individual which may be grounds for termination of training, employment, or contracts that resulted from this certification.

I attest under penalty of perjury that my total household income annually, based on my total household size, is at or below the income amount for that specific size at the time of this document is being signed and notarized. I understand that proof of this statement may be requested in the future.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

A picture identification card and proof of current residency is required.

### FOR ADMINISTRATIVE USE ONLY

Is the employee a Section 3 worker based upon their self-certification?  YES  NO

Is the employee a Targeted Section 3 worker based upon their self-certification?  YES  NO

Was this an applicant who was hired as a result of the Section 3 project?  YES  NO

If Yes, what is the name of the company? \_\_\_\_\_

What was the date of hire? \_\_\_\_\_ Position: \_\_\_\_\_

**EMPLOYERS MUST RETAIN THIS FORM IN THEIR SECTION 3 COMPLIANCE FILE FOR FIVE YEARS.**