



**BELLINGHAM  
WHATCOM COUNTY  
HOUSING AUTHORITIES**

# Applicant Data Sheet

Human Resources, 208 Unity Street, P.O. Box 9701, Bellingham, WA 98227-9701  
 Phone: 360-715-7330, E-mail: [HR@bellinghamhousing.org](mailto:HR@bellinghamhousing.org), Fax: 360-676-7747  
 Website: [www.bellinghamhousing.org](http://www.bellinghamhousing.org)

**We take pride in a diverse workforce, and are committed to Equal Employment Opportunity & Diversity. In accordance with the Americans with Disabilities Act, and Section 504 of the Rehabilitation Act, no employee or qualified person applying for employment will be discriminated against in our employment programs and services because of a disability. Please give us at least 24 hours advanced notice (when possible) if you require any disability accommodation.**

<b>Position Applying for:</b>	
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Full Legal Last Name	Full Legal First Name	Full Legal Middle Name or Initial
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**PLEASE READ CAREFULLY BEFORE COMPLETING INFORMATION BELOW.**

For the purpose of complying with Executive Order 11246 as a Federal Contractor EEO-4 reporting, and the HUD Act of 1968 Section 3 reporting, the Bellingham Whatcom County Housing Authority is required to maintain statistical records on its applicants. The following information is voluntary, confidential and will be used for statistical records and reports only. This sheet will be detached and kept separate from your application and will not be used in a discriminatory manner. **Please note that if you are hired, this information will be required and may be subject to verification.**

Yes	No	BWCHA Resident Status
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- Are you currently a resident in any of the Bellingham Whatcom County Housing Authority's housing programs? If yes, community name/program name \_\_\_\_\_
- Have you ever been a resident in any public housing programs? If yes, location and approximate dates \_\_\_\_\_

Yes	No	Household & Income Information – HUD Act of 1968 Section 3
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- Do you live in the Bellingham/ Whatcom County Region?

**Please indicate where your household size and annual gross household income fall in this table:**

Household Size	1 person	2 person	3 person	4 person	5 person	6 person	7 person	8 person +
Income amount	28,400 or less <input type="checkbox"/>	32,450 or less <input type="checkbox"/>	36,500 or less <input type="checkbox"/>	40,550 or less <input type="checkbox"/>	43,800 or less <input type="checkbox"/>	47,050 or less <input type="checkbox"/>	50,300 or less <input type="checkbox"/>	53,550 or less <input type="checkbox"/>
Income amount	28,400-34,080 <input type="checkbox"/>	32,450-38,940 <input type="checkbox"/>	36,500-43,800 <input type="checkbox"/>	40,550-48,600 <input type="checkbox"/>	43,800-52,560 <input type="checkbox"/>	47,050-56,460 <input type="checkbox"/>	50,300-60,360 <input type="checkbox"/>	53,550-64,260 <input type="checkbox"/>
Income amount	Over 34,080 <input type="checkbox"/>	Over 38,940 <input type="checkbox"/>	Over 43,800 <input type="checkbox"/>	Over 48,660 <input type="checkbox"/>	Over 52,560 <input type="checkbox"/>	Over 56,460 <input type="checkbox"/>	Over 60,360 <input type="checkbox"/>	Over 64,260 <input type="checkbox"/>

- I prefer to not provide this information at this time, but understand it will be required if I am hired for the job.

The information requested in the following questions is intended for use solely in connection with the agency's affirmative action reporting obligations. Answering these questions is entirely voluntary. Choosing to disclose, or not, will not subject an applicant to any adverse treatment during the recruitment or hiring process. Should you choose to answer, the information you provide will kept confidential and used only in accordance with the law. For more information, you may visit [http://www.eeoc.gov/eeoc/publications/ada\\_veterans\\_employers.cfm](http://www.eeoc.gov/eeoc/publications/ada_veterans_employers.cfm).

Ethnic & Cultural Background – EEOC - Civil Rights Act - 1964
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Please indicate the ethnic background origin from which you most closely identify:

- African American/Black - Persons of Black African descent (not Hispanic)
- Asian/Pacific Islander - Persons of Far Eastern, Indian subcontinent, or Pacific Islands descent (not Hispanic)
- Caucasian/White - Persons of European, Middle Eastern, or North African descent (not Hispanic)
- Hispanic/Latino – Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race
- Native American/Alaska Native - Persons from the original peoples of the Americas, and who maintain tribal affiliation or community attachment

Yes	No	ADA – Americans with Disabilities Act of 1990
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- Are you disabled? (*impairment which substantially limits one or more of a person's life activities*)  
 The ADA prohibits all public entities, regardless of the size, from discriminating in employment against qualified individuals with disabilities.

Other Information
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Gender:  Male  Female      Are you over 40 years old?  Yes  No

Yes	No	Veteran Status
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- Have you ever served in the United States Armed Forces?
- If yes, are you a veteran of the Vietnam conflict era or the Persian Gulf conflict? If yes, please specify \_\_\_\_\_
- If you have served in the Armed Forces do you self-identify as a "disabled veteran"?

Signature	Date:
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