



405 NE Church St., Portland, OR 97211

503-281-1234

www.constructinghope.org

APPLICATION

This application is for the express purpose of assisting interested individuals to enter into construction trade career fields. The Constructing Hope Pre-Apprenticeship Program provides equal program entrance for all qualified people regardless of race, sex, sexual orientation, gender identity, national origin, political affiliation, or any other non-job related factors.

Qualified applicants must be at least 18 years old, willing to participate in our full program curriculum, participate in the mentor program and you must be physically and mentally capable of performing the job. Collected information will be used to direct the individual to other appropriate or necessary resources. People with a legal history are encouraged to apply.

Print Contact Information:

Date of Application: _____

First Name: _____ MI: _____ Last Name: _____

Main Phone: _____ Alt. Phone: _____

Message Phone (if different): _____

Email Address: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (if different): _____

City: _____ State: _____ Zip Code: _____

Personal Information:

What is your first language? _____ Do you have any children? Y N

Gender: M F Non-Binary Other: _____ If yes, how many children? _____

Social Security Number: _____ Date of Birth: _____

Identification/Driver's License #: _____ State: _____

Is your License Current? Y N Is your License Suspended? Y N Do you have a Hardship Permit? Y N

If suspended, what do you need to do to get it reinstated? _____

Please provide printed name, phone number, email, and city/state of three contact persons. People who will know how to reach you and indicate their relationship to you (Mother, Brother, Friend, Etc.):

Name: _____ Relation: _____ Phone: _____

City: _____ State: _____ Email: _____

Name: _____ Relation: _____ Phone: _____

City: _____ State: _____ Email: _____

Name: _____ Relation: _____ Phone: _____

City: _____ State: _____ Email: _____

Demographic Information:

Which of the Following Best Describes Your Race/Ethnicity? (Check all that apply):

- African American or Black Native Hawaiian or Pacific Islander Asian LatinX/Hispanic
 White, not of Hispanic Origin Native American/Alaskan Native Other: _____

If a member of a Federally Recognized Tribe, which one? _____

What is your Marital Status? Married Domestic Partnership Married-Separated Divorced
 Single—No Dependents Single—Head of Household

Please Check All That Apply: Veteran Refugee or Immigrant LGBTQ2SIA+
 Currently in Military/or Reserves Person with Disability

Do you have permanent housing? Y N If no, please describe your housing situation: _____

How many people live in your household? _____ How many dependents/children live in your household? _____

Do you work with other programs? Y N

If yes, which program(s)? Please include Program Name(s), Case Manager Name(s), and Phone Number(s): _____

Law Enforcement Involvement/History:

Do you have a criminal history? Y N

If yes, please print name and contact information for your Parole/Probation Officer: _____

Are you currently on probation/parole? Y N

What offense resulted in your most recent prison or jail stay? (Ex. possession of controlled substance, theft, etc.) _____

Employment Information:

What is your employment status at this time? Never Employed Part-Time Full-Time Unemployed

Please provide the following information for your **current** OR **most recent** employment:

Company Name: _____ Job Title: _____

Start Date: _____ End Date: _____ Wage/Hour: _____ Hours/Week: _____

Weekly Income: _____ Annual Household Income: _____ Other Income: _____

Please check "No Benefits" or all that apply: No Benefits Health/Medical Dental Disability
 Life Insurance Retirement/Pension Plan

Do You or Anyone In Your Household Receive Assistance of the Following Type (check all that apply)?

SNAP (food stamps) TANF (Cash Assistance) Unemployment Benefits
 Public Housing/Section 8 Housing Assistance Medicaid (Oregon Health Plan, Washington Apple Health)

Education: What is the highest grade or year of school you have completed?

Some College High School Graduate GED Graduate Working on GED (answer questions below)

How many terms completed (if Some College)?

Up to 1 year Between 1 to 2 years Between 2 to 3 years Between 3 to 4 years Other: _____

Highest grade completed (if GED Graduate or Working on GED)?

7 8 9 10 11 Other: _____

Which GED Tests have you completed (if Working on GED)?

Mathematical Reasoning Reasoning Through Language Arts Social Studies Science None

Trades of Interest (check all that apply):

Carpenter Cement Mason Electrician Plumber Heavy Equipment Operator
 Laborer Mechanic Painter Pile Driver Other: _____

Any Additional Information We Should Know?

Please Read and Sign Below:

- I understand that upon acceptance into Constructing Hope, I am making a **three-year commitment** to remain in contact with program staff for on-going support and career advancement services. I agree to report my income (wages and hours worked) to the program staff **every quarter**.
- I hereby certify to the best of my knowledge that the information given herein is true and accurate and I understand that the information I have supplied is subject to verification.

SIGNATURE _____ **DATE** _____