

# HOUSING AUTHORITIES CITY OF EUREKA & COUNTY OF HUMBOLDT



735 WEST EVERDING STREET, EUREKA CA 95503 PHONE: (707) 443-4583 FAX: (707) 443-4762 TTY: (800) 651-5111

### APPLICATION FOR EMPLOYMENT

POSITION
Housing Programs Specialist I, II and III

Application Closing Date: Open until filled

The City of Eureka Housing Authority and the County of Humboldt Housing Authority are seeking an individual to fill the Housing Programs Specialist position in the Tenant Department. This is a full-time, year-round position and enjoys all of the salary and benefits of a full-time employee as described in the Housing Authorities Personnel Policy.

Applicants are required to return a letter of interest and resume along with the standard application included in the packet. Please return the completed packet to Heather Humphreys at the Housing Authority office, 735 W. Everding Street, Eureka, California. You may also email a completed packet to <a href="mailto:heatherh@eurekahumboldtha.org">heatherh@eurekahumboldtha.org</a> with a subject line of Housing Specialist I, II, and III.

The position will remain open until filled. Interviews will be scheduled as soon as possible. A hiring decision will be made after completion of the interviews. At the time of the job offer, the position is available contingent on a successful background check and a work fitness exam.





# City of Eureka Housing Authority County of Humboldt Housing Authority Job Summary

Job descriptions are written as a representative list of the **ADA essential** duties performed by the entire classification. They cannot include, and not intended to include, every possible activity and task performed by every specific employee.

Job Title: Housing Programs Specialist I, II and III Date: January 2024

Under the direction of: Housing Programs Supervisor

Grade: TBD, \$3,800 - \$5,370/month (DOE) + benefits FLSA Status: Non-Exempt

Application Closing Date: Open until filled.

#### SUMMARY

Under general supervision, performs duties in either Public Housing, intake or Housing Choice Voucher (Section 8).

**ESSENTIAL DUTIES AND RESPONSIBILITIES** include the following. This list is meant to be representative, not exhaustive. Some incumbents may not perform all the duties listed while in other cases related duties may also be assigned. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

#### **INTAKE DUTIES**

Interviews program applicants and explains programs and eligibility criteria.

Interviews program applicants.

Takes applications from parties interested in Housing Authority Programs.

Establishes eligibility based on verification of income and other factors and makes initial eligibility determinations.

Informs applicants of eligibility status.

Refers families to social service agencies for needed services.

Maintains computerized waiting lists in compliance with HUD regulations and guidelines.

#### **PUBLIC, FAMILY and SENIOR HOUSING DUTIES**

Performs eligibility screening, placement, and ongoing case management for all public housing clients in PHA owned units.

May make home visits to PHA tenants

Coordinates placement of tenants into vacant units with maintenance and accounting departments.

Explains tenant and landlord rights and responsibilities and program rules regulations and penalties.

Makes referrals to community agencies and resources.

Establishes and maintains program records and files.

Maintains a computerized system for units under management.

Determines priority of need of vacant units.

Performs lease up functions.

Annually verifies family eligibility.

Determines interim changes in rent.

Assists in request to move from one unit to another.

Assists in investigations of program abuse.

Prepares HUD and other reports.

Creates tenant notices and/or refers problems to Community Liaison for follow-up.

#### HOUSING CHOICE VOUCHER DUTIES

Establishes initial placement and on-going case management for Housing Choice Voucher participants.

Briefs families to explain program rules and regulations.

Issues vouchers for eligible applicants.

Prepares lease contracts and other documents related to the Housing Assistance Program.

Prepares monthly, quarterly and annual reports.

Maintains computerized records and files.

Determines rent amounts.

Performs related duties as assigned.

#### **MINIMUM QUALIFICATIONS:**

The requirements listed below are representative of the knowledge, skills and abilities required to satisfactorily perform the essential duties and responsibilities.

## Knowledge of:

Principles and practices of the Housing Authority.

Office procedures including data entry, filing and copying.

Intake interviewing.

Housing Choice Voucher (Section 8) & Public Housing.

### Ability to:

Communicate effectively verbally and in writing.

Operate a PC and related software.

Maintain effective working relationships with other people.

Explain public housing programs.

Conduct intake interviews.

Operate complex office equipment.

Make onsite inspections.

**EDUCATION and/or EXPERIENCE** Any combination of education and experience that demonstrates possession of the requisite knowledge, skill and abilities. A typical way to obtain these would be: High School Diploma. AA preferred. One year of experience in public contact.

Valid CA driver's license. CPR and First Aid Certificate.

**PHYSICAL DEMANDS** The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

While performing the duties of this job, the employee is regularly required to sit. The employee frequently is required to use hands to finger, handle, or feel; reach with hands and arms; and talk or hear. The employee is occasionally required to stand and walk. The employee must regularly lift and/or move up to 10 pounds and occasionally lift and/or move up to 25 pounds. Specific vision abilities required by this job include close vision, and ability to adjust focus.

**WORK ENVIRONMENT** The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. The Housing Authority follows Covid-19 safety guidelines. While performing the duties of this job, the employee regularly works in indoor conditions and regularly works near video display. The noise level in the work environment is usually moderate.

# Housing Authorities of the City of Eureka and County of Humboldt 735 W. Everding Street Eureka, CA 95503 (707) 443-4583

# Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classes. Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. Additionally, you may attach a résumé, but all questions must still be answered.

POSITION APPLYING FOR \_\_\_\_\_

| DIRECTIONS FOR COMPLETING THIS APF 1. This application must be printed or typed. 2. All sections of this application must be complet 3. Additional information may be attached (stapled 4. Resumes are not an acceptable alternative to a | ed. Items<br>d) to the a | left blank ma<br>pplication. | •         | se for dis | qualifica   | ation.      |          |
|---|--------------------------|------------------------------|-----------|------------|-------------|-------------|----------|
| 1. NAME:Last Name   | me                       | 4                            |           |            | Middle Name |             |          |
| 2. ADDRESS:   |                          |                              |           |            | <del></del> | <del></del> | <u></u>  |
| Street  3. PHONE NUMBERS: ()  Home  |                          |                              | ess/Cell  | )          | State       | Zip<br>     |          |
| 4. SOCIAL SECURITY NUMBER:  |                          |                              |           |            |             |             |          |
| 5. Are you authorized to work in the United S   | states on a              | an unrestric                 | ted basi  | s: Yes □   | l No        |             |          |
| 6. Do you have any physical ailments or disa position for which you are applying? Yes □ (Note that passing a qualifying health examinates) lf yes, please explain:  | No □<br>ation prio       | r to employr                 | ment is r | nandato    | ry.)        | g the dutie | s of the |
|   |                          |                              |           |            |             |             | _        |
| 7. Have you been discharged, forced to resige employment within the last ten years? Yes ☐ If yes, give name and address of employer, resident.  | No □                     |                              |           |            |             |             | <u> </u> |
|   |                          |                              |           |            |             |             |          |
| 8. Are you required to register as a Sex Offer  | nder?                    | Yes □                        | No □      |            |             |             |          |
| 9. Are you required to register as a Drug Offe  | ender?                   | Yes □                        | No □      |            |             |             |          |
|   |                          |                              |           |            |             |             |          |

| 10. Have you ever worked for the Housing Authority of the City of Eureka?   |  |                   |            |              | Yes □                  | No □         |  |  |
|---|--|-------------------|------------|--------------|------------------------|--------------|--|--|
| 11. Do you have any relatives employed by the Housing Authority?  |  |                   |            |              | Yes □                  | No □         |  |  |
| 12. Do you have a curre   | 12. Do you have a current California Driver's License? |                   |            |              | Yes □                  | No □         |  |  |
| License No:   | License No: Expiration Date:                           |                   |            |              |                        |              |  |  |
| Note: possession will be required fo  | of a current unrestricted finalists.                   | d driver's lice   | ense is ma | andatory for | this job; a            | DMV printout |  |  |
| 13. EDUCATION   |  |                   |            |              |                        |              |  |  |
| Name of High School:  |  |                   |            |              |                        |              |  |  |
| Dates Attended  | Degree Awarded   | Date Awarded      |            |              | pecial Areas of Focus  |              |  |  |
| Name of College:  |  |                   |            |              |                        |              |  |  |
| Dates Attended  | Degree Awarded   | Date Awarded      |            | Spe          | ecial Areas of Focus   |              |  |  |
| Name of Other School:   |  |                   |            |              |                        |              |  |  |
| Dates Attended  | Degree Awarded   | Date Awarded      |            | Spe          | Special Areas of Focus |              |  |  |
| 14. Are you fluent in any languages other than English? If so, please specify:  Language Fluent in: Speaking □ Reading □ Writing □  Language Fluent in: Speaking □ Reading □ Writing □  15. Special skills: List any special skills or experience that you feel would help you in the position for whice you are applying  16. References: Please list at least three professional references not related to you, with full name, address, phone number, and relationship. If you don't have professional references, then list personal, |  |                   |            |              |                        |              |  |  |
| unrelated (non-family) re<br>Name   |  | es. Address Phone |            | none         | Re                     | lationship   |  |  |
|   |  | . 133,000         |            |              |                        |              |  |  |
|   |  |                   |            |              |                        |              |  |  |
|   |  |                   |            |              |                        |              |  |  |
|   |  |                   |            |              |                        |              |  |  |

| 17. WORK EXPERIENCE: Begin wittime during the past five (5) years. Ube considered if job related.   | •   | •                     |               |                      |
|---|---|-----------------------|---------------|----------------------|
| Employer's Name:  |   |                       |               |                      |
| Address:Street  |   |                       | -             |                      |
| Street Duties performed:  | City  |                       | State         | Zip<br>              |
| Salary per month \$   |   |                       | Volunte       | er: 🗆                |
| Reason for leaving:   |   |                       |               |                      |
| Supervisor's name and phone number  | er:   |                       | ****          |                      |
| Employer's Name:  |   |                       |               |                      |
| Address:  | <u></u>                                     |                       |               |                      |
| Street Duties performed:  | City  |                       | State         | Zip                  |
| Salary per month \$   |   |                       | Volunte       | er: □                |
| Reason for leaving:   |   |                       |               |                      |
| Supervisor's name and phone number  |   |                       |               |                      |
| Employer's Name:  |   |                       |               |                      |
| Address:Street  |   |                       |               |                      |
| Street Duties performed:  | City  |                       | State         | Zip                  |
| Salary per month \$   |   |                       | Volunte       | er: □                |
| Reason for leaving:   |   |                       |               |                      |
| Supervisor's name and phone number  | er:<br>************************************ | *****                 | ******        |                      |
| 18. Please explain any periods of no  |   |                       |               |                      |
|   |   |                       |               |                      |
| 19. May we contact your present em  | ployer? Yes □ No □                          | ]                     |               |                      |
| 20. I CERTIFY that the statements mad knowledge and belief and are made in g material fact will cause forfeiture of my r                                    | ood faith. I understand                     | and agree that missta | atements or o |                      |
| I AUTHORIZE the employers and education have concerning my employment or education.   |   |                       | to release a  | iny information they |
| I UNDERSTAND that after a conditional qualifications and submit to a physical e ground check. If upon checking these, it understand I will be disqualified. | xamination (including p                     | re-employment drug t  | esting) and a | a criminal back      |
| APPLICANT'S SIGNATURE:  |   |                       | _ DATE: _     |                      |