## City of Utica Employee Questionnaire

This employer has received financial assistance from the City of Utica and the U.S. Department of Housing and Urban Development Community Development Block Grant program. A condition of the receipt of this assistance is that all prospective employees of the firm must provide certain information regarding their family as of the day prior to application or hiring. Please provide the information requested below. Your responses will be kept entirely confidential.

Employee Name:					
Name of Employe	er:				
Position:			Date of Hire:		
the same househ	old who are relance the check the income	<b>ited by birth,</b> e range that m	<b>marriage, o</b> ost closely ma	or adoptic	mily is defined as all persons living in on) as of the day prior to the day you total of the annualized income(s) of your
	Below	Betwee	n Abov	/e	
1	Person	\$30,800	\$49,250		
2	Persons	_ \$35,200	_\$56,250		
3	Persons	_\$39,600	\$63,300		
4	Persons	_ \$43,950	_ \$70,300		
5	Persons	_ \$47,500	_ \$75,950		
6	Persons	_\$51,000	_ \$81,550		
7	Persons	_ \$54,500	_ \$87,200		
8	Persons	_ \$58,050	_ \$92,800		
In order to assure (but not required)			ements of the	e HUD pr	ogram are being met, you are requested
"I consider myse White, Is your househol	Asian, Bl	lack, His	panic,	<b>opriate ca</b> Native An	tegory): nerican
The information p	provided is true to	the best of my	y knowledge.		
Signed:					
EMPLOYER CI	ERTIFICATION				
The above person	was hired on:	as a	Full Ti	me or	Part Time employee.
Signed:		Title:		Date:	

Effective Date: May 15, 2024