

**Monterey County Alternative Housing Site Worker Application**

**Overview**

The County of Monterey Emergency Operations Center operates Alternate Housing Sites (AHS) to temporarily house COVID-19 positive and COVID-19 exposed residents who have no place to safely isolate during their designated isolation period. If you meet the eligibility requirements listed below, you can be hired to help with guest services, registration, food distribution, and facilitating maintenance at AHS locations throughout the County, including homeless shelters, Project Roomkey locations, and other service sites, providing an opportunity to serve your community in its time of need as well as a deeply rewarding personal experience. COVID-19 safety training will be provided to the Site Worker.

Would you like to make an impact in someone’s life? Apply today, opportunity is waiting for you.

**Eligibility**

* Must be 18 or older
* Must have the right to work in the United States
* Males must be registered with Selective Service
* Adult: Must have low income
* Dislocated Worker: Must be laid off or long-term unemployed
* 18- 24/Youth: Must be out of school and have low income
* Participants must pass a background check

**Terms of Employment for Jobs/Work Experience (WEX)**

* $17.00 per hour
* 32 hours per week
* Up to 26 weeks of employment
* Three shifts available: 7:00am-4:00pm; 3:00pm-12:00am: and 11pm-8:00am
* Participants cannot work overtime
* Two location to select from to work – Salinas and King City

Call us now for services provides by phone, all offices all closed to walk-in due to COVID-19

For more information applicant can call AJCC 866-666-9332 or Turning Point 831-256-7110

*The Monterey County Workforce Development Board is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.*

TDD/TTY # 831-753-6541 – This WIOA Title 1 financially assisted program or activity is an equal opportunity employer/program, and auxiliary aids and services are available upon request to individuals with disabilities.

**Application for Alternative Housing Site Worker**

## Applicant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Full Name:** |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Address:** |  | | | | | | |  | | |
|  | Street Address | | | | | | | Apartment/Unit # | | |
|  |  | | | | | |  |  | | |
|  | City | | | | | | State | ZIP Code | | |
| **Cell Phone:** |  | | | **Email** | |  | | | | |
| Are you a citizen of the United States? | | YES | NO | | If no, are you authorized to work in the U.S.? | | | | YES | NO |
| Are you temporarily or permanently laid off because of COVID-19? | | YES | NO | |  | | | | | |
| Have you been unemployed for more than 15 of the previous 26 weeks? | | YES | NO | |  | | | | | |
| Were you self-employed and became significantly underemployed as a consequence of COVID-19? | | YES | NO | |  | | | | | |
| Do any of the follow situations applies to you? | | YES | NO | |  | | | | | |
| **Authorized to work in U.S., and**   1. **Terminated or laid off, eligible for or exhausted UI and unlikely to return to industry or occupation; or** 2. **Lost job from permanent closure or substantial layoff of a plant, facility or enterprise; or** 3. **Was self-employed and now unemployed because of economic conditions or natural disaster.** 4. **Or a member of Armed Forces who lost employment due to permanent change in duty station or is unemployed, underemployed and has difficulty finding or upgrading employment** | | | | | | | | | | |

## Education

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **High School:** | | |  | | | | Address: | |  | | | | |
| From: |  | | | To: |  | **Did you graduate?** | | | YES | | NO | Diploma: |  |
| **College:** | |  | | | | | | Address: | |  | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | **Did you graduate?** | YES | NO | Degree: |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **College:** |  | | | | Address: |  | | | | |
| From: |  | To: |  | **Did you graduate?** | | | YES | NO | Degree: |  | |
|  |  |  |  |  | | |  |  |  |  | |
| **Other**: |  | | | | Address: |  | | | | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Degree: |  |

## EMPLOYMENT

|  |  |  |  |
| --- | --- | --- | --- |
| **Company:** |  | Phone: |  |
| Address: |  | Supervisor: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |

|  |  |
| --- | --- |
| **Responsibilities:** |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: | |  | To: |  | Reason for Leaving: | | |  | | |
| May we contact your previous supervisor for a reference? | | | | | | YES | NO |  | | |
|  | | | | | |  |  |  | | |
| **Company:** |  | | | | | | | | Phone: |  | |
| Address: |  | | | | | | | | Supervisor: |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **Responsibilities:** | |  | | | | | |
| From: |  | | To: |  | Reason for Leaving: |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | | |  |  | | --- | --- | | YES | NO | | |  |  | | --- | --- | |  |  | |  | | |
| **Company:** |  | | | | Phone: |  | |
| Address: |  | | | | Supervisor: |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |

|  |  |
| --- | --- |
| **Responsibilities:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |



|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES | NO |  |

## Military Service

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Branch: |  | From: |  | To: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Rank at Discharge: |  | Type of Discharge: |  |

|  |  |
| --- | --- |
| If other than honorable, explain: |  |

## Disclaimer and Signature

**I certify that my answers are true and complete to the best of my knowledge.**

**If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date**: |  |

**Best Phone # to reach you:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **Location Desired:** \_\_\_\_\_\_ King City \_\_\_\_\_\_ Salinas  **Shift Preferred:** \_\_\_\_\_7 am – 4 pm \_\_\_\_\_3pm-12 am \_\_\_\_11 am – 8 am |

[**www.montereycountywdb.org**](http://www.montereycountywdb.org)

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