

PROJECT LABOR AGREEMENT TARGETED WORKER SURVEY FORM

All information provided is voluntary and confidential. Please return this form to the PLA Coordinator <u>CityofSDPLA@sandiego.gov</u> or <u>ccrocker@sandiego.gov</u> (619) 236-5973

Worker Name: Image: Address: Zip Code: Zip Code: Phome Number: Email: Email: Image: Address: Project Name: Email: Image: Address: Image:	WORKER INFORMATION						
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□ Formerly incarcerated with a history of involvement in the criminal justice system		Documented household income at or below 100 percent of the Federal Poverty Level					
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DECLINE TO STATE							

*an eligible spouse is either someone who is married to an active duty service member, someone married to a former service member who is 100% disabled due getting injured in armed forces service, or the spouse of a service member killed while on active duty (who has not remarried)

I Certify that the above information is true and correct.

Worker Signature: ______Date: ______