

EMPLOYMENT APPLICATION

Housing Authority of the County of Salt Lake



We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, gender, religion, national origin, marital or veteran status or disability. Upon request, the Housing Authority of the County of Salt Lake will provide reasonable accommodations to individuals with disabilities. The Housing Authority complies with all applicable 504 and ADA Regulations.

USE TYPEWRITER OR PRINT CLEARLY IN INK

TITLE OF POSITION APPLIED FOR: _____

Name: _____
Last Name First Name Social Security Number

Address: _____
Street Address Area Code Home Phone Work Phone

City State Zip Code

Date Available for Employment: _____

Type of Employment Desired: Full Time Part Time Temporary
Are you employed now? _____ If so, may we inquire of your present employer? _____

EDUCATION

High School Name/Location: _____ Did you Graduate? _____

College, Business or Technical College Location	Official Major	Qtr. Hrs.	Sem. Hrs.	Degree	Type Degree
Trade, Correspondence or Apprentice School Location	Subject or Field	No. of Mths.	Total Act. Hrs.	Course Completed	Type Cert.

Professional or Trade License, Certificates or Registrations: _____
Kind Number State

EXPERIENCE (List most recent job first):

Employer:
Address: Phone Number:
Job Title: Supervisor's Name:
Dates employed (mo/yr) From: To:
Hours worked per week:
Beginning salary or hourly rate: Ending salary or hourly rate:
Duties:
Reason for leaving:

Employer:	
Address:	Phone Number:
Job Title:	Supervisor's Name:
Dates employed (mo/yr) From:	To:
Hours worked per week:	
Beginning salary or hourly rate:	Ending salary or hourly rate:
Duties:	
Reason for leaving:	

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Hours worked per week:	
Beginning salary or hourly rate:	Ending salary or hourly rate:
Duties:	
Reason for leaving:	

I hereby authorize any previous employers to give and release to the hiring division any and all information of whatever kind in either written or verbal form which relates to my ability to perform the duties of the position for which I am applying. I release the Housing Authority of the County of Salt Lake of any liability for the use of this information in considering and reviewing my application for the available position. I understand that I must pass a criminal background, drug screen and credit history check before hire.

CERTIFICATION OF APPLICANT

I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE AND THAT ANY MISSTATEMENT OF MATERIAL FACTS MAY SUBJECT ME TO DISQUALIFICATION OR DISMISSAL.

Signature

Date