Application for Employment

The Brunswick Housing Authority

Positio	n Applying For	•			_ Date:	2	0
Last Na	ame	First Name		Middle Name	Social Se	curity Number	
Addres	 SS				Telephone	e Number	
City		State	Zip				
include	e volunteer act		exclude	ast employment. organizations tha			
1.	 Employer	From	 1 To	Dutios	or Respons	ibilitios	
	Employer	FIOII	1 10	Duties	or respons	ibilities	
	Address				City	State	Zip
	Hourly/Salar	y:					
	Start/Final Sa	ılary:		_			
	Job Title			Supervisor		Phone Nur	mber
	Reason for Le	eaving	-				
2.	Employer	From	n To	Duties	or Respons	ibilities	
	Address				City	State	Zip
	Hourly/Salary	y:					
	Start/Final Sa	ılary:					
	Job Title			Supervisor		Phone Nur	mber

	Reason for Leaving	g 5				
3.	Employer	From		Duties or Respon	sibilities	
	Address			City	State	Zip
	Hourly/Salary:			_		
	Start/Final Salary:			_		
	Job Title			Supervisor	Phone	Number
	Reason for Leaving	g				
4.	Employer	From	То	Duties or Respon	sibilities	
	Address			City	State	Zip
	Hourly/Salary:			_		
	Start/Final Salary:			_		
	Job Title			Supervisor	Phone	Number
	Reason for Leaving	g				
f you n		_	e a sepa	arate sheet of paper.		
Highest	t Education Level Co	ompleted:				
School	Lo	ocation		Diploma/Degree		Major
High Sc	chool					
 Frade/I	Professional School					

Specialized Training, Apprenticeship, Extracurricular Activities, Certifications, Honors, Awards					
Special Job-Related Ski	lls and Qualification fron	n Employment and Other	r Experience		
Foreign Languages	Fluent	Good	Fair		
Speak					
Read					
Write					
Professional, Trade, Bu	siness or Civic Organizat	ions/Offices			
You may exclude organize	ations that indicate race, co	olor, religion, national origi	n or other protected status		
Military Service					
Branch of Service	Reserve/Guard	Service Dates	Type of Discharge		
Job-Related Training					
Personal					
Yes No Have you ever applied to us before? If yes, when?					
Yes No	Have you ever been employed with us before? If yes, when?				
Yes No	No Do you have a relative or a friend employed with us? If yes, Who?				

Yes	_ No	May we contact your present employer?				
Yes	_ No	Have you ever been convicted of a crime, other than a traffic violation? Conviction will not necessarily disqualify you from employment. If yes, please explain.				
Yes	_ No	If applying for a position that requires driving, do you valid license?	ou have an appropriate and			
Yes	_ No	If applying for a position that requires driving, have you ever been ticketed for a moving violation including Driving Under the Influence?				
Yes	No	Are you a citizen of the United States?				
Y es	_ No	If no, does your immigration status permit you to work? Proof must be provided: Visa or Lawful Permanent Resident Card				
Yes	_ No	Are you currently on "Layoff" status or subject to recall?				
On wha		be available for work?				
	•	Part Time Temporary				
		If required, are you available for travel?				
Providin referenc		Previous Employers of Relatives on means that you give the Brunswick Housing Authority pe	ermission to contact the			
1.	Name	Address	Telephone Number			
2.	Name	Address	Telephone Number			
3.	Name	Address	······			
4.	Name 	Address	Telephone Number			
	Name	Address	Telephone Number			

Applicant's Acknowledgement

Acknowledgement of Rights and Duties

The applicant understands that neither this document nor any offer of employment from this employer constitutes an employment contract unless a specific document is executed in writing by the employer and the employee. If the applicant is employed by the Brunswick Housing Authority, the employment will be at will. That is, the employee may be terminated at will and the employee may terminate his/her employment at will.

I certify that answers given in the application, including those regarding training and experience are true and complete to the best of my knowledge. I authorize investigation into all statements I have made on this application as may be necessary for reaching an employment decision.

In the event I am employed, I understand that any false or misleading information I knowingly provided

			r legal action. I also understand that if the Brunswick Housing Authority.
Applicant's	Signature		
Consent to	Obtain Motor Vehicle Re	oort	
Brunswick F		n my driving record for th	thorize and consent to allow the ne last seven (7) years from or through the
This	day of	, 20	
Applicant's	Signature		Witness
Consent to	Drug Testing		
to be perfor			thorize and consent to allow drug testing ures and protocols approved by the
Applicant's	Signature		Witness
Consent to	Fingerprinting and Record	l Check	
occupied by concern of t Authority to	residents of the Brunswicthe Brunswick Housing Au becamine your record by	ck Housing Authority or o thority. It is required that consenting to being finge	ssigned may involve entering apartments thers. Safety of residents being a primary you authorize the Brunswick Housing rprinted at the City of Brunswick Police swick Housing Authority review
Applicant's	 Signature		Witness

For Housing Authority Use Only

Interview Arranged: Yes No	Date/Time:	
Comments:		
Employed: Yes No	Start Date:	
Department:	Title:	
Hourly/Salary: \$		