



# Tioga County & Bradford County Housing Authorities

## APPLICATION FOR EMPLOYMENT

(Please Print)

|          |                                                                                                                                                                     |            |                |                                                          |
|----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------------|----------------------------------------------------------|
| PERSONAL | LAST NAME                                                                                                                                                           | FIRST NAME | MIDDLE INITIAL | DATE OF APPLICATION                                      |
|          | PREVIOUS NAME(S) USED (INCLUDING MAIDEN NAME)                                                                                                                       |            |                |                                                          |
|          | STREET ADDRESS                                                                                                                                                      |            | APT/ UNIT #    | HOME TELEPHONE NO.                                       |
|          | CITY, STATE, ZIP                                                                                                                                                    |            |                | BEST TIME TO CALL                                        |
|          | TYPE OF WORK DESIRED<br><input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary |            |                | DESIRED SALARY<br>\$                                     |
|          | POSITION APPLIED FOR                                                                                                                                                |            |                | DATE AVAILABLE TO BEGIN WORK                             |
|          | Are you able to perform the "essential functions" of the job for which you are applying with or without reasonable accomodation?                                    |            |                | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|          | If necessary for the job, are you able to work overtime?                                                                                                            |            |                | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|          | Are you legally eligible for employment in the United States? (Proof of eligibility will be required)                                                               |            |                | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|          | Are you at least 18 years of age?                                                                                                                                   |            |                | <input type="checkbox"/> Yes <input type="checkbox"/> No |

### EMPLOYMENT HISTORY

 Please begin with your current or most recent employer. You may attach a resume, but you must also complete this section.

|   |                           |                                                                                           |
|---|---------------------------|-------------------------------------------------------------------------------------------|
| 1 | COMPANY                   | TELEPHONE NO.                                                                             |
|   | ADDRESS                   | JOB TITLE                                                                                 |
|   | SUPERVISOR NAME AND TITLE | EMPLOYMENT DATES<br>FROM:                      TO:                                        |
|   | JOB RESPONSIBILITIES      | SALARY<br>START:                      FINAL:                                              |
|   | REASON FOR LEAVING        | MAY WE CONTACT THIS EMPLOYER?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2 | COMPANY                   | TELEPHONE NO.                                                                             |
|   | ADDRESS                   | JOB TITLE                                                                                 |
|   | SUPERVISOR NAME AND TITLE | EMPLOYMENT DATES<br>FROM:                      TO:                                        |
|   | JOB RESPONSIBILITIES      | SALARY<br>START:                      FINAL:                                              |
|   | REASON FOR LEAVING        | MAY WE CONTACT THIS EMPLOYER?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3 | COMPANY                   | TELEPHONE NO.                                                                             |
|   | ADDRESS                   | JOB TITLE                                                                                 |
|   | SUPERVISOR NAME AND TITLE | EMPLOYMENT DATES<br>FROM:                      TO:                                        |
|   | JOB RESPONSIBILITIES      | SALARY<br>START:                      FINAL:                                              |
|   | REASON FOR LEAVING        | MAY WE CONTACT THIS EMPLOYER?<br><input type="checkbox"/> Yes <input type="checkbox"/> No |

### EDUCATION

|             |                                             |                                                                                                 |                              |
|-------------|---------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------|
| HIGH SCHOOL | NAME AND ADDRESS OF HIGH SCHOOL             |                                                                                                 |                              |
|             | CONCENTRATION/ AREA OF STUDY                | DO YOU POSSESS H.S. DIPLOMA OR GED?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | GPA                          |
| COLLEGE     | NAME AND ADDRESS OF COLLEGE OR TRADE SCHOOL |                                                                                                 |                              |
|             | CONCENTRATION/ AREA OF STUDY                | DID YOU GRADUATE?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                   | DEGREE or CERTIFICATE EARNED |
| OTHER       | NAME AND ADDRESS OF COLLEGE OR TRADE SCHOOL |                                                                                                 |                              |
|             | CONCENTRATION/ AREA OF STUDY                | DID YOU GRADUATE?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                   | DEGREE or CERTIFICATE EARNED |

|               |                                                                                                               |                |
|---------------|---------------------------------------------------------------------------------------------------------------|----------------|
| <b>ANSWER</b> | If necessary for the job you are applying, do you possess a valid Driver's license?                           | [ ] Yes [ ] No |
|               | Are you willing to travel if the job requires it?                                                             | [ ] Yes [ ] No |
|               | Have you ever been terminated from a job, or asked to resign in lieu of being terminated?<br>If Yes, explain: | [ ] Yes [ ] No |

Please list any other skills, abilities or certifications you possess relevant to the position(s) you are applying for.

|               |  |
|---------------|--|
| <b>SKILLS</b> |  |
|---------------|--|

|               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|---------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>ANSWER</b> | <p>Have you ever been convicted for a crime? (Exclude convictions that have been sealed, expunged or legally eradicated, and misdemeanor convictions for which probation was completed and the case was dismissed)</p> <p>[ ] Yes [ ] No</p> <p>If Yes, please briefly describe the nature of the crime(s), the date and place of conviction and the legal disposition of the case. (This company will not deny to any applicant solely because the person has convicted a crime. The company, however, may consider whether the offense is relevant to the duties of the position applied for).</p> |
|               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

**REFERENCES-** Please list at least three (3) professional references

|          |                     |              |
|----------|---------------------|--------------|
| <b>1</b> | Full Name and TITLE | RELATIONSHIP |
|          | COMPANY             | PHONE NO.    |
|          | ADDRESS             | YEARS KNOWN  |
| <b>2</b> | Full Name and TITLE | RELATIONSHIP |
|          | COMPANY             | PHONE NO.    |
|          | ADDRESS             | YEARS KNOWN  |
| <b>3</b> | Full Name and TITLE | RELATIONSHIP |
|          | COMPANY             | PHONE NO.    |
|          | ADDRESS             | YEARS KNOWN  |

**PLEASE READ AND SIGN**

|                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |            |       |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------|
| <b>DISCLAIMER</b> | <p>I certify that the information contained in this application is true and correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.</p> <p>I authorize any person or organization listed on this application to furnish you any and all information concerning my previous employment, education, and qualifications for employment. I also authorize Tioga Bradford Housing and Redevelopment Authority to request and receive such information.</p> <p>I also acknowledge that my status is "at-will" meaning employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the organization or myself.</p> <p>It is the policy of Tioga/ Bradford County Housing Authority to provide equal employment opportunity to all persons regardless of age, color, national origin, citizenship status, physical or mental disability, race, religion, creed, gender, sex, sexual orientation, gender expression, marital status, status with regard to public assistance, status as a disabled veteran and/or veteran status of the Vietnam Era, or any other characteristic protected by federal, state or local law.</p> |            |       |
|                   | <table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">SIGNATURE:</td> <td>DATE:</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | SIGNATURE: | DATE: |
| SIGNATURE:        | DATE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |            |       |

|                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |            |       |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------|
| <b>CONSENT</b> | <p>I understand that a requirement for employment with Tioga County &amp; Bradford County Housing Authority is the successful completion of drug testing to determine the presence of illegal drugs in my body. I understand that a positive test will disqualify me at this time for further consideration of employment. By my signature below, I hereby agree and consent to provide a urine sample at a facility designated by the Housing Authority; I hereby consent to have the sample tested for the presence of illegal and legal drugs. I authorize the release of test results to Tioga/ Bradford County Housing Authority in its use for evaluating me for employment; and I release the Tioga/ Bradford County Housing Authority from any and all liability and claims incident to such sample taking, testing, and use of test results. I understand and agree if I begin employment prior to taking this test or prior to the results being received, I will be a temporary and contingent employee until such time as I successfully complete the drug test.</p> |            |       |
|                | <table border="1" style="width: 100%;"> <tr> <td style="width: 70%;">SIGNATURE:</td> <td>DATE:</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | SIGNATURE: | DATE: |
| SIGNATURE:     | DATE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |            |       |

