

EMPLOYMENT APPLICATION



THE WILSON HOUSING AUTHORITY IS AN
EQUAL OPPORTUNITY EMPLOYER

The Wilson Housing Authority
301 E. Nash Street
Wilson, NC 27893

Last

First

MI

Date of Application

INSTRUCTIONS FOR COMPLETING APPLICATION

1. Please include correct names, addresses and information asked for in this application.
2. Application must be typed or clearly printed in black or dark blue ink. The application must be signed and dated in ink. Any application that contains information which is illegible will be disqualified.
3. A résumé may be attached to the application, but will not take the place of the employment application. The résumé will be considered as an addendum to the application. However, all questions in the application must be answered fully and without reference to the résumé.
4. After a formal employment offer has been made by the Wilson Housing Authority, you will need to supply documentation establishing your employment identity and eligibility within three business days in accordance with U.S. Citizenship and Immigration Services (USCIS) requirements. Lists of acceptable documents may be found on page 4 of federal form I-9 located at: <http://www.uscis.gov/files/form/I-9.pdf>.
5. Application, addendums, attachments, and any supplements to the application will not be returned to the applicant. Applications will remain current for 60 days.
6. All parties interested in requesting an application or further information should contact the Wilson Housing Authority at the address below or call (252)291-2245

Please send application, résumé (if desired), and/or other attachments, to the following address:

Wilson Housing Authority
Attn: HR Manager
301 E Nash St.
Wilson, NC 27894
Fax: (252) 293-0131

Note: The Wilson Housing Authority and its agents reserve the right to request additional information from selected applicants when deemed to be in the best interest of the Agency.

APPLICATION FOR EMPLOYMENT

DATE: _____ POSITION: _____ DATE AVAILABLE: _____

NAME: _____ S.S.# _____ / _____ / _____
Last First M.I.

PRESENT ADDRESS: _____
Street City State Zip

Time at above Address: _____ / _____ (Years/Months)

Current Telephone Number: _____ Email Address: _____

Type of employment desired: Full-time Part-Time Temporary

Previous Address: List chronologically all your residences for the past 10 years. Include addresses while attending school or away from home.

Date: From/To		Street Address		City		State	
Date: From/To		Street Address		City		State	
Date: From/To		Street Address		City		State	
Date: From/To		Street Address		City		State	

Yes No Are you legally authorized to work in the U.S.?
(You will be required upon employment to submit verification of your legal right to work in the United States.)

Yes No Are you 18 years old or older? If no, can you provide a work permit if necessary? _____

Yes No Have you been convicted of a crime? If yes, please explain: _____

(Conviction will not necessarily disqualify an applicant from employment.)

Yes No Have you worked for the Wilson Housing Authority before? If yes, give dates: _____

Yes No Can you work weekends, evenings, shifts?

Yes No Can you travel, if required?

Current Driver's License Number: _____ State of Issue: _____

Expiration Date: _____ Non-Commercial Commercial Endorsement: _____

Yes No Has your privilege to operate a motor vehicle ever been suspended or revoked, or have you ever been convicted of driving under the influence (D.U.I.)? If yes, explain fully below (give dates and incidences):

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Employer:	Dates Employed	
Telephone: ()	FROM	TO
Address:		
Job Title:	Beginning Hourly Rate/Salary	
Supervisor and Title:	\$	Per
Reason for Leaving:	Ending Hourly Rate/Salary	
May we contact for reference? Yes No	\$	Per

Responsibilities: _____

Employer:	Dates Employed	
Telephone: ()	FROM	TO
Address:		
Job Title:	Beginning Hourly Rate/Salary	
Supervisor and Title:	\$	Per
Reason for Leaving:	Ending Hourly Rate/Salary	
May we contact for reference? Yes No	\$	Per

Responsibilities: _____

Employer:	Dates Employed	
Telephone: ()	FROM	TO
Address:		
Job Title:	Beginning Hourly Rate/Salary	
Supervisor and Title:	\$	Per
Reason for Leaving:	Ending Hourly Rate/Salary	
May we contact for reference? Yes No	\$	Per

Responsibilities: _____

Comments:(Include explanation of any gaps in employment) _____

Have you ever been dismissed or asked to resign from any employment or position you have held? Yes No

Employer's Name _____ Date _____

If Yes, give reason: _____

EDUCATIONAL BACKGROUND

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank E. Major field of study. F. Minor field of study (if applicable).					
A. School/Location	B. Years Completed	C. High School Diploma/GED Certificate/Degree	D. GPA	E. Major	F. Minor

PROFESSIONAL REFERENCES

List name and telephone of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.		
Name	Telephone	Years Known
	()	
	()	
	()	

ADDITIONAL INFORMATION

List professional, trade, business, or civic associations and any offices held. Exclude memberships that would reveal Sex, Race, Religion, National Origin, Age, Color, Disability, or any similarly protected status.	
Organization	Office Held

SKILLS AND EXPERIENCE: (Check any that apply to you.)

- | | | |
|--------------------|-------------------------------|-----------------------------|
| Personal Computer | Bookkeeping/Accounting | Shorthand/Speedwriting |
| Computer Language | Adding Machine/Calculator | Legal Transcription |
| Typing (wpm _____) | Data Entry/10-key | Business Telephone/Intercom |
| Word Processing | Office Equipment (copier/fax) | Other _____ |

List software proficiencies: _____

List work-related licensing or certifications: _____

List any additional information you would like us to consider (You may attach additional sheet.)

DISCLOSURES, DISCLOSURE AUTHORIZATION, AND RELEASE

I UNDERSTAND AND AGREE THAT:

If I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the Wilson Housing Authority, whenever it is discovered.

The Wilson Housing Authority does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any application from consideration for employment on a basis prohibited by local, state, federal law. The Wilson Housing Authority does not discriminate on the basis of sex, race, religion, color, national origin, age, disability, veteran status, or any other protected class or status.

If employed, I may resign at any time, with or without notice or cause and the employer reserves the right to terminate or modify the relationship at any time with or without notice or cause, except as may be required by law or as negotiated by employee contract. I agree to conform to the rules and regulations of The Wilson Housing Authority and I understand that this application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than the President/Chief Executive Officer, has the authority to make any written or verbal commitment of employment with the Agency. I further understand that any such assurances must be in writing and signed by the President/Chief Executive Officer.

As a condition of employment or my continued employment, I will be required to provide proof of identity, and may be requested to submit to a urinalysis, drug screen, and/or other tests and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for employment, or if I am then employed, may result in my immediate dismissal. I further understand that any employment offer and/or my continued employment may be conditionally based upon satisfactory completion of background checks and police reports, and any information required to complete the employment process.

Although management attempts to accommodate individual circumstances, including religious observance requirements, business needs may at times make the following conditions required: overtime, rotating work schedule, or work schedule that includes Saturday and Sunday.

I give The Wilson Housing Authority and/or its authorized representatives the right to contact and obtain information from all references, employers, educational institutions, and to otherwise verify the accuracy of the information contained in this application. In exchange for consideration of my employment application, I release The Wilson Housing Authority and its representatives and any organization or individual it may contact from any and all damages, liabilities, or claims that may exist or arise relating in any way to the release or receipt of information as provided herein. I further agree not to file or pursue any complaints, claims, or legal actions of any kind against any organization or individual that provides work-related information about me to the Agency or any of its employees, representatives, or agents arising out of their efforts to obtain work-related information about me.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions. I certify that the facts I have provided in this employment application are true and complete.

Signature of Applicant: _____ Date: ____/____/____

Typed or Printed Full Name: _____