HOUSING AUTHORITY OF FREEPORT APPLICATION FOR EMPLOYMENT

(PLEASE PRINT CLEARLY)

TO APPLICANT: We deeply appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications and may assist us in possible upgrading. BE SURE TO FILL THIS OUT COMPLETELY, DO NOT LEAVE ANY BLANK SPACES.

								Date			
Vame	<u> </u>							Soc	. Se	c. No	
La	ıst		First		Middle						
Permanent Address	No.	Street		City	State	Zip		Tele	phon	e No	
		Succi		City	State	Ζip					
Previous Address_	No.	Street		City	State	Zip		Tele	phon	e No	
Are you available to			□ Part	•	Are you on a l	•	nd sı	ıbjec	t to r	ecall 🗆 Yes	□ No
Are you legally elig	ible for empl	oyment in t	the U.S.A	A.?				State	age	if under 18_	
Can you read, write	and speak Er	nglish fluen	itly?		Any other lang	guages,	other	thar	Eng	glish	
What method of tra	nsportation w	rill you use	to get to	work?							
Position(s) applied	for				Rate	of pay e	xpec	ted \$		per	week
Would you work □	Full Time	□ Part '	Time	Specify days	and hours if part ti	me					
Were you previousl	y employed b	y us?		If y	es, when? (Date) _						
	or employmer	nt at this co	mpany b	efore?	If ye	s, when	? (Da	ite)_			
Have you applied for											
		favorably,	on what	date will you	be available for wor	k?					
f your application	is considered				be available for wor						
f your application	experiences,		alificatio			ly fit yo		woi	k wi		ization
f your application	experiences,	skills or qu	alificatio	ons which you	feel would especial	lly fit yo □ y	u for	woi	k wi	th our organ	ization
f your application	is considered experiences,	skills or qu	alificatio	ons which you Friend RECORD	feel would especial	lly fit yo □ y	Valk-	wor -In	k wi	th our organ	ization
f your application and Are there any other Referral Source:	is considered experiences,	skills or qu vertisemen	alificatio	ons which you Friend RECORD	feel would especial Relative OF EDUCATION	lly fit yo □ y	Valk-	- WOI -In k Last	k wi	th our organ Employn Did you	nent Agency List Diploma or
f your application of Are there any other Referral Source:	is considered experiences,	skills or qu vertisemen	alificatio	ons which you Friend RECORD	feel would especial Relative OF EDUCATION	lly fit yo □ v	Valk-	-In k Last	k wi	th our organ Employn Did you	nent Agency List Diploma o
f your application in Are there any other Referral Source: School Elementary	is considered experiences,	skills or qu vertisemen	alificatio	ons which you Friend RECORD	feel would especial Relative OF EDUCATION	lly fit yo □ v	Chec Y Com	-In k Last ear pleted	k wi	th our organ Employn Did you	nent Agency List Diploma o

PAST EMPLOYMENT

Company			Гуре of Business	
Address	City	State	Zip Code	
Telephone No()			·	
Date of Employment: From:		To:	Month Day Year	
Name of Manager			Telephone No	
Name of Supervisor			Telephone No	
Name of Foreman			Telephone No	
Name of Co-worker			Telephone No	
Describe the work you did				
Your job title				
Before taxes \$ Beginning Salary:	per		Ending Salary:	per
How did you get the job?				
Why did you leave? or Why are you	planning to leave?			
And the second s				
What experience(s) did you gain that	you felt were particularly va	aluable?		
Least valuable?				
Most rewarding?				
Least rewarding?				
Are you employed by the above com	nany now? \(\text{Ves} \(\text{No} \)		If so, may we contact all thos	e listed? ☐ Yes ☐ No

PAST EMPLOYMENT

Company			Type of Business	
Address	City	State	Zip Code	
Telephone No()				
-	Month Day Year	To:	Month Day Year	
Name of Manager			Telephone No	
Name of Supervisor			Telephone No	
Name of Foreman			Telephone No	
Name of Co-worker			Telephone No	
Describe the work you did				
Your job title				
	S per		Before taxes \$ Ending Salary:	per
Beginning Salary: After taxes \$_	per		After taxes \$	per
How did you get the job?				
Why did you leave? or Why are	you planning to leave?			
				100
What experience(s) did you gain	n that you felt were particularly va	iluable?		
Least valuable?				
Most rewarding?				
Least rewarding?				
Are you employed by the above	e company now? Yes No		If so, may we contact all those	e listed? 🗆 Yes 🗆 No

PERSONAL REFERENCES

	(Not Former Employers or Relatives)		
Name and Occupation	Address	Phone Number	Years Acquainted
Were you in the U.S Armed Forces? ☐ Yes ☐ No			
Dates of duty: From To Month Date Year Month	Date Year Rank at discharge		-
List duties in the service including special training_			
			
Have you taken any training under the G.I. Bill of I	Rights? If yes, what training did	you take?	
I certify that the facts set forth in this emp falsified statements on this application in any detail. I authorize the Company to make any involution in solution is obtained through personal interview may include information as to my character, general make a written request within a reasonable period convestigative report that is made. In consideration information from any liability as a result of furnish. I further agree that, if employed, I will convent the company's or my option. I understand the resident has any authority to enter into any contract conform my conduct to the Company's rules and reducing the course of my employment shall not be contracted.	estigation of my personal history and financial on, I authorize the Company to make an invest is with my neighbors, friends or others with what reputation, personal characteristics and mod of time to receive additional detailed information of the company's review of this application, I in ing and receiving this information. Inform my conduct to the Company's rules and sloyment can be terminated with or without call that no personnel recruiter, interviewer or reject of employment contrary to these terms. I fingulations; however, any employment manuals construed as a contract.	the best of my knowledge on sideration for hire or in and credit record through tigative consumer report from I am acquainted. The of living. I understand the nature and release the Company and regulations and understance and with or without presentative of the Company are the company and the company are the company and the company and the company are the company	gh any investigative whereby his inquiry, if made of I have the right to scope of any such dall providers of and that, unless notice, at any time pany other than its femployed, I will be distributed to mexamination

Date

Signature of Applicant