

GEORGETOWN HOUSING AUTHORITY
P.O. Box 60
Georgetown, TX 78627-0060
(512) 863-5565

APPLICATION FOR EMPLOYMENT

PRINT IN BLACK INK OR TYPE. These instructions must be followed exactly. Fill out the application form completely; if questions are not applicable, enter "NA". Do not leave response line blank. Resumes will be accepted for whatever additional information they might contain, *but not in place of a complete application.* Be sure to sign the application when it is completed.

NAME _____ SOCIAL SECURITY NO. _____
 (LAST) (FIRST) (MI.)

ADDRESS _____ PHONE _____
 (STREET) (CITY) (STATE) (ZIP)

POSITION DESIRED _____

SALARY EXPECTED _____ FULL-TIME PART-TIME DATE AVAILABLE FOR WORK _____

Are you willing to work hours other than 8-5? Yes No If yes, indicate when _____

Have you ever been convicted of a felony? Yes No If yes, please describe: _____

Are you or anyone in your family participating in a Georgetown Housing program as tenant or landlord? Yes No

If yes, please explain: _____

EDUCATION:

Highest elementary/ high school grade completed _____ Graduate/ earn a GED? Yes No
 (Note: Transcripts or diploma may be required for verification of education)

Type of School	Name and location of school	Dates attended (From ___ to ___)	Did you graduate? (yes or no)	List diploma or Degree earned

Please list any current licenses/certifications/registrations (include type and data received): _____

SPECIAL SKILLS/QUALIFICATIONS: List machines or office equipment you can operate: _____

Approximately words per minute in: Typing _____ wpm Dictation _____ wpm

What foreign languages do you speak fluently? _____ read fluently? _____

write fluently? _____

MILITARY SERVICE: (ACTIVE DUTY) Branch _____ Dates: From: _____ To: _____

Are you in the Active Reserve? Yes No

EMPLOYMENT RECORD: Please indicate at least 10 years of employment. Start with the present or most recent position and work back. Include military service and use additional sheets if necessary.

<u>EMPLOYER:</u> Mailing Address Phone # :		Type of Business:		Full Time <input type="checkbox"/>
				Part Time <input type="checkbox"/>
				Seasonal <input type="checkbox"/>
Position:	Starting Date:	Starting Pay:	Leaving Date:	Ending Pay:
Briefly describe your duties and responsibilities below:		Who was/ is your immediate Supervisor?		
Explain reason for leaving:				
<u>EMPLOYER:</u> Mailing Address Phone # :		Type of Business:		Full Time <input type="checkbox"/>
				Part Time <input type="checkbox"/>
				Seasonal <input type="checkbox"/>
Position:	Starting Date:	Starting Pay:	Position:	Starting Date:
Briefly describe your duties and responsibilities below:		Who was/ is your immediate Supervisor?		
Explain reason for leaving:				

Do you have any relatives working for the Georgetown Housing Authority? Yes No If yes, list names, relationship, and position.

I hereby certify that the foregoing statements as well as those on any attachments(s) to the form are, to the best of my knowledge, true and correct and that they are all given of my own free will. I agree that any misstatements as to material facts will constitute grounds for unfavorable consideration or dismissal from employment. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice. A DPS Criminal Background check, driving record, TX Drivers License, and drug screen will be required upon offer of employment.

May we contact your present employer? Yes No

Applicant Signature _____ Date: _____

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