

# RENTON HOUSING AUTHORITY

2900 NE 10<sup>th</sup> St, PO Box 2316  
 Renton, WA 98056-0316  
 Phone 425-226-1850 Fax 425-271-8319



Renton Housing Authority takes pride in the diversity of its work force and is committed to Equal Employment opportunity.

## APPLICANT INFORMATION

Last Name				First				M.I.	Today's Date	
Street Address							Apartment/Unit #			
City				State				ZIP		
Phone				E-mail Address						
Date Available				Last 4 digits of Social Security No.				Desired Salary		
Position Applied for										
Availability	Full time <input type="checkbox"/>		Part-Time <input type="checkbox"/>		Temporary <input type="checkbox"/>					
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Do you have a partner friend or family member who is employed by the housing authority	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, name and relation?							
<i>Have you ever been convicted of a felony?</i>	<i>YES <input type="checkbox"/></i>	<i>NO <input type="checkbox"/></i>	<i>If yes, explain</i>							

## EDUCATION

High School				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree or Certificate			

## DRIVING RECORD

*All employees of RHA are responsible for maintaining a good and insurable driving record. Please provide the following information.*

Drivers License State				Drivers License Number						
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## PROFESSIONAL REFERENCES

Name	Occupation / Job Title	Length of time known	Phone Number

**PREVIOUS EMPLOYMENT**

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision including but not limited to background checks and credit history and release all parties providing such information from any liability for any loss or damage whatsoever resulting from providing such information. If employment is denied in whole or part due to a credit report, I will be informed by the housing authority.

Signature

Date