

SPRINGFIELD
HOUSING
AUTHORITY

SPRINGFIELD HOUSING AUTHORITY

25 Saab Court
Springfield, MA 01104
Human Resources Tel. (413) 785-4598 • Fax (413) 785-4574

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Applicants will receive consideration without regard to race, color, religious creed, national origin, ancestry, sex, age, handicap (disability), mental illness, retaliation, sexual harassment, sexual orientation, and genetics.

Date _____

Desired Position	_____		
Name	_____		
First	Middle	Last	
Address	_____		
Daytime Phone ()	_____	Evening Phone ()	_____
Date Available to Work	_____		

Education

	Name and Location of School	Circle Last Year Completed				Did you Graduate?		Subjects Studied and Degrees Received
		1	2	3	4	Y	N	
High School								
Undergraduate College/ University								
Graduate/ Professional								
Other: (Specify)								

Describe any additional specialized training or certifications you possess that may be helpful in considering your application: _____

Experience

Please summarize your previous employment experience, starting with your current or most recent job. Include all jobs worked within the past five years as well as any job-related military service and volunteer experience. Use additional space on Page 4 if necessary.

1	Current employer (Name and address – Type of business)	Dates of Employment From _____ To _____	Position _____ Salary _____ Reason for Leaving _____
	Duties Performed		
	Supervisor's Name	Phone Number ()	May We Contact? Y N
2	Previous employer (Name and address – Type of business)	Dates of Employment From _____ To _____	Position _____ Salary _____ Reason for Leaving _____
	Duties Performed		
	Supervisor's Name	Phone Number ()	May We Contact? Y N
3	Previous employer (Name and address – Type of business)	Dates of Employment From _____ To _____	Position _____ Salary _____ Reason for Leaving _____
	Duties Performed		
	Supervisor's Name	Phone Number ()	May We Contact? Y N
4	Previous employer (Name and address – Type of business)	Dates of Employment From _____ To _____	Position _____ Salary _____ Reason for Leaving _____
	Duties Performed		
	Supervisor's Name	Phone Number ()	May We Contact? Y N

Is additional information provided on Page 4? Y N

Skills

Please list any job-related skills that you possess that are relevant to your application.

Language Skills Please indicate your level of ability in English and any other language(s). Use additional space on Page 4 if necessary. (Circle the appropriate levels)

Language	English		
Reading Ability	Fair	Good	Fluent
Writing Ability	Fair	Good	Fluent
Speaking Ability	Fair	Good	Fluent

Language			
Reading Ability	Fair	Good	Fluent
Writing Ability	Fair	Good	Fluent
Speaking Ability	Fair	Good	Fluent

General

Please answer the following questions

(Circle one)

1. Have you previously been employed by the SHA? Y N
If so, state job title and dates of employment: _____
2. Does a member of your immediate family work for the SHA? (For the purpose of this question, the term immediate family includes a spouse, brother, sister, parents, in-laws, or any person who resides in your household.) Y N
If so, provide their name(s), address, position at the SHA, and relationship to you. _____
3. Are you either a public housing resident or a participant in a subsidized certificate or voucher program? If so, please indicate dates of participation: From _____ To _____ Y N
4. Are you lawfully able to work in the United States? (All new hires will be required to provide proof of eligibility to work in the U.S.) Y N
5. If you are under the age of 18, can you obtain a work permit? Y N
5. Do you have a valid Driver's License? N/A
5. Do you have a valid Driver's License? Y N
6. Within the last five years have you been convicted of, or released from incarceration for a misdemeanor which was not a first offense for drunkenness, simple assault, speeding, a minor traffic violation, an affray, or disturbing the peace?* If so, please explain: _____ Y N
7. Have you ever been convicted of a felony?* If so, please explain: _____ Y N

(*An applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances, or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.)

Please read the following statement *carefully*

I hereby affirm that I have read and understand this application and that the information that I have provided on and with this application is true and complete to the best of my knowledge. I agree that any omission or falsified information will disqualify me from further consideration for employment and will be considered justification for my immediate dismissal if discovered at a later date.

I hereby authorize persons, schools, current employer (if applicable) and previous employers and organizations listed in this application (and accompanying resume, if any) to provide Springfield Housing Authority with any relevant information that may be required to arrive at an employment decision. I hereby release said persons and entities and Springfield Housing Authority from any and all liability for providing this information.

I acknowledge that any offer employment is contingent upon successful completion of drug and alcohol screening and a pre-employment physical examination as well as Criminal Offender Record Information screening.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

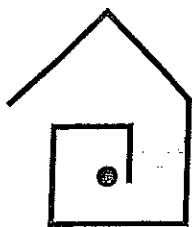
Signature _____

Date _____

The Springfield Housing Authority may ask you to provide references.

If necessary, please use this page to include any additional information.

A large rectangular area containing numerous horizontal lines, intended for providing additional information.



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APPLICANT DATA RECORD

Applicants are considered for all positions. The Springfield Housing Authority prohibits discrimination in employment based on race, color, religious creed, national origin, ancestry, sex, age, genetic information, sexual orientation, sexual harassment, disability, veteran status and membership in the armed forces.

As a government contractor, we comply with government regulations and affirmative action responsibilities. These include taking affirmative action to employ and promote qualified women, minorities, individuals with disabilities, special disabled Veterans, and Veterans. Information with respect to these categories need not be provided and any information provided will be used for affirmative action purposes and in accordance with the Rehabilitation Act of 1973 and other Federal law.

Solely to help us comply with government record keeping, reporting and other legal requirements, please fill out the Applicant Data Record. We appreciate your cooperation. Refusal to provide this information will not subject you to adverse treatment.

This data is for periodic government reporting and will be kept in a Confidential File separate from the Application for Employment. This information will not be considered in the application process.

(Please Print)

Position(s) Sought _____ Date: _____

Name _____ Phone () _____
Last First Middle

Affirmative Action Survey

(Please check the appropriate boxes below)

- Male
- White
- American Indian/Alaskan Native
- Black

- Female
- Asian/Pacific Islander
- Hispanic/Latino
- Other _____

Please check if applicable:

- Veteran