



# Stanislaus Regional Housing Authority

ALPINE | AMADOR | CALAVERAS | INYO | MARIPOSA  
MONO | STANISLAUS | TUOLUMNE COUNTIES

## Applicant Information

First Name:		Last Name:		Date:	
Address:				Apt/Unit #	
City:		State		Zip Code:	
Phone:			E-mail Address:		
Message Phone:					
Position applying for: (Required)					
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 been discharged or asked resigned?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain?		
Do you read & write in any language(s) other than English?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, what language(s)?		

## Education

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

## References

*Please list three professional references.*

Full Name:		Relationship:			
Company:				Phone:	
Address:					

Full Name:		Relationship:			
Company:				Phone:	
Address:					

Full Name:		Relationship:			
Company:				Phone:	
Address:					

**Previous Employment (attach additional pages if necessary)**  
**Resume may be attached but will not substitute for completing this section.**

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"/>	
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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"/>	
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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"/>	
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List any schooling, special skills, training, certifications, machines or equipment you can operate, which relate to the requirements of this position (Attach additional pages if necessary)


**Disclaimer and Signature**

Note: Applicants with Disabilities. If you require special testing arrangements, please contact the Personal office when you submit your application. Reasonable effort will be made to accommodate your needs. After reviewing the job description are you in need of any special accommodations in order to perform the essential functions of this position? Yes  No

The Stanislaus Regional Housing Authority does not discriminate on the basis of handicap in admission or access to, its housing assistance programs or in its employment practices, in Violation of 24 CFR Part 8. It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification, and to maintain a drug free workplace. This application is part of the examination process. Failure to meet all the requirements presented in the announcement by the final filling date is cause for rejection. All application data is due by 5:00 p.m. PST on the announced closing date for the position. 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 agree to submit to a complete physical exam which will include a drug/alcohol test** and to furnish such proof of age and citizenship as may be required by law.

Signature:				Date:		
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