



Housing Authority **City of San Buenaventura**
 995 Riverside Street • Ventura, CA. 93001-1636 • (805) 648-5008 • FAX: (805) 643-7984

Employment Application
An Equal Opportunity Employer
A RESUME WILL NOT SUBSTITUTE FOR THE INFORMATION REQUESTED

PERSONAL INFORMATION

The Housing Authority of the City of San Buenaventura will consider all applicants for all positions in compliance with the Americans with Disabilities and Fair Employment and Housing Acts which provide protection from harassment or discrimination in employment because of: age, ancestry, color, creed, disability (mental and physical), genetic information, marital status, national origin, race, religion, sex (including pregnancy), sexual orientation, and gender expression.

Please Print Clearly

Last Name		First Name		Middle Name		Today's Date	
Current Street Address				City		State	Zip
<i>Permanent Mailing Address, if different from present address</i>				City		State	Zip
Home phone number		Cell phone number		Daytime phone number			
E-Mail Address <i>(Please print clearly-this will be your primary source of contact)</i>							
Position applying for:				If hired, on what date can you start work?			
Salary desired: \$ _____ per _____		Have you ever worked for the Housing Authority before? <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>If "Yes", when?</i>			
How did you learn about this opening?							
Do you have any friends or relatives working for the Housing Authority? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes", list their names and relationship to you.</i>		Name		Relationship			
		Name		Relationship			
<input type="checkbox"/> Yes <input type="checkbox"/> No		If hired, would you have a reliable means of transportation to and from work?					
<input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have a valid California driver's license?					
<input type="checkbox"/> Yes <input type="checkbox"/> No		If "Yes," has your driver's license ever been revoked or suspended? <i>If "Yes," state reason(s), date of revocation or suspension and date of reinstatement.</i>					
<input type="checkbox"/> Yes <input type="checkbox"/> No		Can you travel if a job requires you to do so?					
<input type="checkbox"/> Yes <input type="checkbox"/> No		If hired, can you present evidence of your U. S. citizenship or proof of your legal right to live and work in this country?					
<input type="checkbox"/> Yes <input type="checkbox"/> No		Are you at least 18 years old? <i>(If under 18, hire is subject to verification that you are of minimum legal age)</i>					
<input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever served in the military?		<i>If "Yes," are you a veteran?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Yes <input type="checkbox"/> No		Are you able to perform the essential functions of the job for which you are applying either with or without reasonable accommodation? <i>If "No," describe the functions that cannot be performed or how you believe we can accommodate you</i>					

The Housing Authority of the City of San Buenaventura will consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform the essential functions of the job.

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EMPLOYMENT HISTORY

You must complete this section even if you are attaching a resume. List below all present and past employment for the past ten years, starting with your most recent employer. Account for all periods of unemployment. Please complete each question thoroughly. If you need more space, please feel free to add an additional paper.

Dates Employed From / To	Employer Name	Address	
Hours weekly	Your Job Title	Reason for leaving	
Your supervisor's name	Your job duties		
Company phone number			
<input type="checkbox"/> Yes <input type="checkbox"/> No May we contact this employer for a reference?			

Dates Employed From / To	Employer Name	Address	
Hours weekly	Your Job Title	Reason for leaving	
Your supervisor's name	Your job duties		
Company phone number			
<input type="checkbox"/> Yes <input type="checkbox"/> No May we contact this employer for a reference?			

Dates Employed From / To	Employer Name	Address	
Hours weekly	Your Job Title	Reason for leaving	
Your supervisor's name	Your job duties		
Company phone number			
<input type="checkbox"/> Yes <input type="checkbox"/> No May we contact this employer for a reference?			

Yes **No** Have you ever been discharged or forced to resign from any position? *If "Yes", explain:*

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EDUCATION, TRAINING AND EXPERIENCE

Check the appropriate box:

- High School Diploma
 GED or High School Equivalency Certificate
 No Diploma
 (If no diploma, list the highest grade you completed) _____

List Colleges, Universities, Vocational and/or Business Schools You Attended

School Name	Location/ Address	Years Completed	Major Course of Study	Degree Awarded?	Degree Type / # units completed
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

List Professional Licenses or Certificates That You Currently Hold	Date Issued	Date Expires	Number and State	Was license or certification ever revoked or suspended?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Yes No Some of our clients do not speak English. Do you speak, write or understand any foreign languages? If "Yes," which one (s)?

Yes No Do you have any other experience, training, qualifications or skills which you feel make you especially suited for this position at the Housing Authority? If "Yes," please explain:

REFERENCES

List below two people not related to you **who have knowledge of your work performance** within the last ten years.
 Do not list personal or social references.

First Name	Last Name	Best Telephone Number To Reach This Person ()		
Current Street Address		City	State	Zip
Their Occupation		Number of Years Acquainted		
First Name	Last Name	Best Telephone Number To Reach This Person ()		
Current Street Address		City	State	Zip
Their Occupation		Number of Years Acquainted		

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely
Initials affect my opportunity for employment and the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of a material fact on this application or on any document used to secure employment, including my resume, shall be grounds for rejection of this application or for immediate discharge, if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the Housing Authority of the City of San Buenaventura to thoroughly
Initials investigate my references; work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the Housing Authority of the City of San Buenaventura any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Housing Authority of the City of San Buenaventura, my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that if offered employment, the offer will be contingent on my passing a post-
Initials offer/pre-employment alcohol and drug screen, pre-employment physical and background check. By signing this application, I **voluntarily agree** to submit to a pre-employment alcohol/drug screen pre-employment physical and background check upon request. I understand that failure to pass the alcohol/drug screen, and/or background check will result in withdrawal of the employment offer.

_____ I understand that nothing contained in the application, or conveyed during any interview
Initials which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Housing Authority. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period, and that no promises or representations contrary to the forgoing are binding on the Housing Authority of the City of San Buenaventura unless made in writing and signed by the Housing Authority's Chief Executive Officer and me.

My signature below certifies that I have read and understand the contents of this Employment Application, including the initialed paragraphs above, and agree to the terms and conditions outlined in this application.

Applicant's Signature

Date

Printed Name