



55 W. Mission Ave.
 Spokane, WA 99201
 (509) 328-2953

EQUAL OPPORTUNITY EMPLOYER **DRUG-FREE WORK ENVIRONMENT**

NOTICE: Read the job posting before filling out this application. Type or print legibly in ink. This application must be completed in full. **A resume does not replace any section of this application.** All statements are subject to verification. Keep a copy of your completed application and attachments as they will not be returned.

APPLICATION FOR
 Title of Position:

APPLICANT INFORMATION

Last Name:	First:	MI:	
Mailing Address:	City:	State:	Zip:
Home Phone: ()	Daytime Phone: ()		

PREVIOUS EMPLOYMENT

Have you previously been employed by Spokane Housing Authority? Yes No Dates: _____ Job Title: _____

CRIMINAL CONVICTIONS (A non-job related conviction does not necessarily bar you from employment)

Have you ever been convicted by a court of law within the past seven years: Yes No If yes, please explain:

LICENSES AND CERTIFICATES (List professional or trade licenses that are related to the position)

Description	Issued By	Expiration Date

EDUCATION

POST-HIGH SCHOOL EDUCATION NAME AND LOCATION	ACADEMIC MAJOR, SKILL OR TRADE	COMPLETED DEGREE

EMPLOYMENT HISTORY: Respond completely to the information requested. Attempt to cover all the requirements listed in the job posting. List your most recent employment first. List all experience, paid and voluntary, related to the position for which you are applying. Include months, days, and years. Failure to provide all information required may result in rejection of your application. Supplemental pages may be used to expand on work history and/or education using the application format. **Resumes will not be accepted in place of completing this application.**

COMPANY NAME:	ADDRESS:	PHONE:
DATES EMPLOYED (Mo/Day/Yr) FROM: / / TO: / /		
JOB TITLE:	SPECIFY DUTIES:	
NO. EMPLOYEES SUPERVISED:		
AVERAGE HOURS WORKED PER WEEK:		
FINAL SALARY: \$		
SUPERVISOR NAME:	REASON FOR LEAVING:	MAY WE CONTACT THIS EMPLOYER <input type="checkbox"/> YES <input type="checkbox"/> NO
COMPANY NAME:	ADDRESS:	PHONE:
DATES EMPLOYED (Mo/Day/Yr) FROM: / / TO: / /		
JOB TITLE:	SPECIFY DUTIES:	
NO. EMPLOYEES SUPERVISED:		
AVERAGE HOURS WORKED PER WEEK:		
FINAL SALARY: \$		
SUPERVISOR NAME:	REASON FOR LEAVING:	MAY WE CONTACT THIS EMPLOYER <input type="checkbox"/> YES <input type="checkbox"/> NO
COMPANY NAME:	ADDRESS:	PHONE:
DATES EMPLOYED (Mo/Day/Yr) FROM: / / TO: / /		
JOB TITLE:	SPECIFY DUTIES:	
NO. EMPLOYEES SUPERVISED:		
AVERAGE HOURS WORKED PER WEEK:		
FINAL SALARY: \$		
SUPERVISOR NAME:	REASON FOR LEAVING:	MAY WE CONTACT THIS EMPLOYER <input type="checkbox"/> YES <input type="checkbox"/> NO

LIST FURTHER JOB DUTIES AND EMPLOYMENT HISTORY ON ADDITIONAL SHEETS USING APPLICATION FORMAT

ADDITIONAL INFORMATION: You may include any comments that may show further qualifications for this position.

All the information I have provided in this application and in any attachments or supporting documents is true, correct, and complete. I understand that if I have provided false or incomplete statements, it will be justification for termination or refusal of employment. I authorize employers, schools, or persons named in this application to give any information regarding my qualifications and character. I release Spokane Housing Authority, all employers, and all references (except as noted above) from any and all liability of damages for receiving or releasing information. If a conditional job offer is made, I agree to driver record check, credit, and/or criminal background checks and understand that employment is contingent upon meeting the job-related driver record, credit, and criminal background check.

Signature

Date

VOLUNTARY APPLICANT IDENTIFICATION

AFFIRMATIVE ACTION EMPLOYER REQUIREMENT

Separate immediately from
Applicant File.

REQUIRED:

Name _____ Phone _____

Address _____

Job applied for, or your specific skill area: _____

The U.S. government requires us to request this information from job applicants.

Your name and contact information is required.

VOLUNTARY INFORMATION:

You may volunteer, but you are NOT REQUIRED, to tell us your ethnicity, race or gender. The information is used to study efforts to attract diverse pools of qualified applicants and ensure equal employment opportunity.

We do not send your response to the government. We report only group totals. However, it may be viewed by federal auditors or other officials. This is NOT part of your employment file. Hiring is always based on individual job qualifications. The law prohibits quotas, preferences or any consideration of your sex, race or ethnicity in employment decisions.

We invite you to **VOLUNTARILY** identify yourself in the categories below, now or at any time in the future. If you decline, it will not subject you to adverse treatment.

1. GENDER: _____ Male _____ Female

2. ETHNIC AND RACIAL BACKGROUND (Please answer both a. and b. if applicable)

a. Hispanic or Latino? () Yes () No

If you selected "No", please also consider volunteering the following:

b. Racial Background - Non-Hispanic:

() White/Caucasian, Non-Hispanic or Latino

() Black or African American, Non-Hispanic or Latino

() Asian, Asian American Non-Hispanic or Latino

() Native Hawaiian or Other Pacific Islander, Non-Hispanic or Latino

() American Indian/Alaska Native, Non-Hispanic or Latino

() 2 or more races, Non-Hispanic or Latino

Please note that these categories are set by the U.S. government, not by the employer.

_____ I decline to answer.

Please sign and return this form even if you do not answer.

Please sign here: _____

Date _____

Employer Use Only:

EEO-1 Occup: 1.1 = Top/Executive Managers, 1.2 = All other managers/supervisors, 2 = Professionals, 3 = Technicians, 4 = Sales, 5 = Adm. Support/ Clerical, 6 = Skilled Crafts, 7 = Operators, 8 = Labor, 9 = Service (guards, janitors)

JOB GROUP CODE: _____

If current opening, job applied for: _____