

Peoria Housing Authority

Moving Families Forward

100 S. Richard Pryor Place Peoria, Illinois 61605-3905 Phone: (309) 676-8736; TTY: (309) 674-0849; Fax: (309) 677-7304

EMPLOYMENT APPLICATION

(Upon Request, a Large Print Version Of This Application Is Available)

APPLICATION INFORMATION – PLEASE PRINT

POSITION APPLYING FOR: _____	
PRINT NAME: _____ <small>(First/Middle/Last)</small> <small>Social Security Number</small>	
PRESENT ADDRESS: _____ <small>(Street, City, State, Zip)</small>	
TELEPHONE NUMBER: _____ <small>Home (Area Code & Phone Number)</small> <small>Cell/Alternate (Area Code & Phone Number)</small>	
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your place of employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed with us before? If yes, give dates of employment.	<input type="checkbox"/> Yes <input type="checkbox"/> No Dates: _____
Are you legally eligible for employment in this country?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Employment desired: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Date available for work?
<i>Are you able to perform the essential functions of the position for which you are applying with or without a reasonable accommodation?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
NOTE TO APPLICANTS: Do not answer this question unless you have been informed about the requirements of the position for which you are applying.	

Revised 10/08/2020

EDUCATION:

SCHOOLS	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA / DEGREE
HIGH SCHOOL				
UNDERGRADUATE COLLEGE				
GRADUATE / PROFESSIONAL				
OTHER (SPECIFY)				

PROFESSIONAL REFERENCES (Please include at least two former supervisors, three total references)

NAME	PHONE NUMBER	BEST TIME TO CALL	OCCUPATION

Some positions may require the operation of a PHA vehicle. Please write your Drivers License Number below.

License Number:	
State of Issuance:	
Expiration Date:	

WORK EXPERIENCE:

(Start with your present or last job. Include any job-related military service assignments and volunteer activities.)

EMPLOYER	DATES EMPLOYED		WORK PERFORMED
ADDRESS	FROM	TO	
TELEPHONE NUMBER			
JOB TITLE			
SUPERVISOR			
REASON FOR LEAVING			

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ADDRESS	FROM	TO	
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REASON FOR LEAVING			

Describe any specialized training, certifications held, apprenticeship, skills and extra-curricular activities.

List professional, trade, business or civic activities or offices held.
(You may exclude memberships which would reveal gender, race, religion, national origin, age disability or other protected status.)

Additional Information/ Other Qualifications
(Summarize special job related skills and qualifications acquired from employment or other experience.)

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, creed, gender national origin, age disability, marital or veteran status, or any other legally protected status.

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not, and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than the Executive Director of the Peoria Housing Authority has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

In making this application for employment I authorize all former employers, [including my present employer; not including my present employer] and any other persons to provide any information they have regarding me, or my employment with them, and I release them and their companies or agencies from any liability for damages resulting from such disclosure(s). Additionally, I authorize PHA to obtain investigative reports, which include a "Criminal Background Check" and any information that may be provided through personal interviews with my neighbors, friends or others with whom I am acquainted. The investigation may include information as to my character, general reputation, personal characteristics and/or life style.

Signature of Applicant _____ **Date** _____