

Lamar Housing Authority—804 South Main Street—Lamar, Colorado 81052
 719.336.9575 Fax: 719.336.9529 Toll Free: 888.569.2056
 TDY-Relay Colorado: 800.6592656

Equal Opportunity Employer: We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, or marital status, the presence of a medical condition or handicap, or any other legally protected status

Answer each question fully and accurately. Use additional paper if you do not have enough room on this application. Please provide only the information requested. Failure to do so will result in disqualification of your application. **PLEASE PRINT**

PERSONAL INFORMATION

Name:	LAST	FIRST	TELEPHONE #	DATE
Mailing Address:	ADDRESS	CITY	STATE	ZIP
Physical Address:	ADDRESS	CITY	STATE	ZIP

EMPLOYMENT DESIRED

Position(s) Desired: 1. _____ 2. _____

Salary Expectations: _____ When could you start? _____

Are you 18 years of age or older? Yes No Can you legally work in the U.S.? Yes No

Have you ever worked for Lamar Housing Authority Before or Have family currently employed here? Yes No

Explain if Yes _____

Have you ever worked or attended school under any other name? Yes No If yes, please list _____

Can you perform the essential functions of this job with or without reasonable accommodations? Yes No

Are you employed now? Yes No If yes, may we contact your present employer? Yes No

Drivers License#: _____ State: _____ Expiration Date: _____ Class(es) _____

Have you had your drivers license suspended or revoked in the last 3 years? Yes No

Have you been convicted of a crime other than minor traffic violation? Yes No

A conviction will not necessarily disqualify you from employment. If you answered yes to above, attach additional page with explanation of conviction(s) to this application. Include (1) Date convicted (2) Charge, (3) Jurisdiction (4) Disposition

EDUCATION AND TRAINING

	NAME OF SCHOOL	CITY, STATE	DEGREE RECEIVED	MAJOR
High School:	_____	_____	_____	_____
College:	_____	_____	_____	_____
College:	_____	_____	_____	_____
Business or Trade School:	_____	_____	_____	_____
Apprenticeships:	_____	_____	_____	_____
Are you currently attending school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Where? _____		
Licenses or Certifications:	_____			
Other Skills and Competencies:	_____			

WORK HISTORY: List employer in order starting with most recent; additional work history may be attached.

Current or most recent employer: _____

Job title: _____ Supervisor _____ Wage:\$ _____

Address: _____ From:Mo/Yr _____ To:Mo/Yr _____

City,State, Zip Code: _____ Phone: #() _____

Reason for leaving: _____ May we contact this employer? _____

Description of work responsibilities: _____

Previous employer: _____

Job title: _____ Supervisor _____ Wage:\$ _____

Address: _____ From:Mo/Yr _____ To:Mo/Yr _____

City,State, Zip Code: _____ Phone: #() _____

Reason for leaving: _____

Description of work responsibilities: _____

Previous employer: _____

Job title: _____ Supervisor _____ Wage:\$ _____

Address: _____ From:Mo/Yr _____ To:Mo/Yr _____

City,State, Zip Code: _____ Phone: #() _____

Reason for leaving: _____

Description of work responsibilities: _____

REFERENCES: List three personal references, other than relatives or former employers.

NAME	CITY, STATE, ZIP	PHONE
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Applicant please read the following statements and sign below. Only signed and dated applications are considered valid:

I certify that the answers given herein are true and complete to the best of my knowledge. **I understand** that false or misleading information given in my application or interview(s) may result in denial of employment or discharge. **I understand** also that I am required to abide by the rules and regulations of the Agency and programs.

As a condition of employment with the Lamar Housing Authority, **I understand** I must provide documentation to prove both identity and employment eligibility as required by the Immigration Reform and Control Act of 1986.

If I am considered for employment, I authorize the Lamar Housing Authority to conduct a thorough investigation of my past employment, education and activities, including but not limited to: the verification of criminal, motor vehicle and maritime public records. **I release** from all liability all persons, companies and corporation supplying such information. **I indemnify** the Lamar Housing Authority against any liability, which might result for making such investigation, **I understand** that my application for employment with the Lamar Housing Authority, as a public entity, may be viewed by any person who requests to do so.

Additionally, **I understand** that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the Agency and myself for any term of employment or for the providing of any benefit. No promises regarding employment may be made to me and **I understand** that no such promise or guarantee would be binding upon the agency unless made in writing, is signed by the Director, and is approved by the Board of Commissioners.

I understand that, as a condition of employment with the Agency or continued employment if hired, I may be required to pass a drug screen and random drug and alcohol testing. I also understand that my employment may be denied or terminated for unfavorable results of such testing.

The Fair Credit Reporting Act (15 USC 1681 et seq.) requires that you **be advised** that as a result of your application for employment or promotion a routine inquiry may be made which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and the scope of the report, if one is made, will be provided.

I understand that the State of Colorado is an at-will employment State. As such, employment may be terminated with or without cause, and with or without notice at any time by the Lamar Housing Authority. An employee may leave our employ at-will with or without cause or notice.

Signature: _____ Date _____

Have you attached additional pages? # _____