



Employment Application

Please fill out entire application and send to:
careers@dothanhousing.org

Equal access to programs, services and employment is available to all persons. Those applicants requiring accommodation to the application and/or interview process should contact a representative of Dothan Housing.

Please do not answer any questions by referencing a resume or other separate documentation. You may attach a resume; however, all questions must be answered.

Name: _____ Date: _____

Address: _____
Street City State Zip Code

If you have lived at this address less than 7 years, please list your prior address: _____

Contact phone number: _____ Email Address: _____

Position(s) applied for: _____ Date available for work: ____/____/____

Have you ever been employed by Dothan Housing? Yes No

If yes, please provide dates: From ____/____/____ To ____/____/____

Are you legally eligible for employment in the United States? Yes No

(Proof of U. S. Citizenship or immigration status is required upon employment.)

Are you at least 18 years of age? Yes No

Can you perform the essential duties of the job with or without a reasonable accommodation? Yes No

Do you have a family member that works at Dothan Housing? Yes No

If yes, please provide their name and relationship to you: _____

Are you a resident of public housing, or are you a HCVP voucher holder? Yes No

Have you been convicted of a felony in the last seven (7) years? Yes No

(Convictions will not necessarily disqualify an applicant for employment. Convictions for which the record has been sealed, expunged, or statutorily eradicated need not be disclosed if applicable state laws (including California law) prohibits inquiries about such convictions. California applicants need not disclose misdemeanor convictions for which probation was completed and the case was dismissed.)

If yes, please explain: _____



Do you possess a valid state issued driver's license? Yes No

Educational Background:

Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, vocational or technical programs and military training.

School/Other	Number of Years Completed	Degree or Diploma	Major	Minor

Skills and Qualifications: Summarize any special training, skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions of the position for which you are applying.

References: Please provide the names and telephone numbers of three business/work references who are not related to you. Preferably current or former supervisors and colleagues who have knowledge of your work experiences and/or education. If not applicable, list three school or personal references who are not related to you.

Name	Telephone	Years Known	Relationship
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	()		
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Employment History: List your last four employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section below.

EMPLOYER	POSITION	DATES EMPLOYED	
Employer:	Job Title:	From	To
Address:			
Telephone: ()			
Immediate Supervisor and Title:	Describe key responsibilities:	Reason For Leaving	
May we contact references? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
EMPLOYER	POSITION	DATES EMPLOYED	
Employer:	Job Title:	From	To
Address:			
Telephone: ()			
Immediate Supervisor and Title:	Describe key responsibilities:	Reason For Leaving	
May we contact references? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
EMPLOYER	POSITION	DATES EMPLOYED	
Employer:	Job Title:	From	To
Address:			
Telephone: ()			
Immediate Supervisor and Title:	Describe key responsibilities:	Reason For Leaving	
May we contact references? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			
EMPLOYER	POSITION	DATES EMPLOYED	
Employer:	Job Title:	From	To
Address:			
Telephone: ()			
Immediate Supervisor and Title:	Describe key responsibilities:	Reason For Leaving	
May we contact references? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later			

Comments:

DOTHAN HOUSING
Acknowledgement

I certify that the facts set forth in this Employment Application are true and complete to the best of my knowledge. It is understood and agreed upon that any omissions, false statements, or misrepresentation by me on this application will be sufficient cause for rescission of this application and/or separation from Dothan Housing if I have been employed. I authorize Dothan Housing to make an investigation of any of the facts set forth in this application and release the Dothan Housing from any liability.

I give Dothan Housing the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability Dothan Housing and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

I understand it is Dothan Housing's policy to require applicants for employment to take a *pre-employment physical examination and pre-employment drug test*. This physical examination and drug screen will not be required until after the applicant has first received a conditional offer of employment. The scope of the physical shall be limited to the physical requirement of the position. Refusal to take the test or a positive test result shall be the basis for disqualifying me for current employment.

The Dothan Housing Authority is an Equal Opportunity Employer. It is Dothan Housing's policy to afford equal employment opportunity to all individuals, regardless of race, color, religion, national origin, ancestry, social origin, age, marital status, veteran status, disability, genetic information, sex, (including pregnancy, childbirth, or related medical conditions), sexual orientation, gender identity or expression or any other characteristic protected by federal, state or local laws. Dothan Housing will comply with its legal obligation to provide reasonable accommodation to qualified individuals with disabilities. All employment is decided on the basis of qualifications, merit and business need.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the Dothan Housing Authority and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that federal law requires new employees, as a condition of employment, to produce certain documentation to verify their identity and United States citizen status or, if aliens, their legal authorization to work in the United States. I understand that any offer of employment to me is contingent upon my ability to produce the required documentation within the time period required by law.

I understand that any employment offered is for an indefinite duration and "at will" and that either I or Dothan Housing may terminate my employment at any time with or without notice or cause. I understand that no representative of the Dothan Housing has the authority to make any assurances to the contrary.

Signature of Applicant _____ Date _____ / _____ / _____