



# Community Housing Improvement Program

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address

City State ZIP Code

Phone/Cell: ( ) E-mail Address:

Date Available: Desired Salary:

Position Applied for: Are you employed now?

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever applied to work at this company? YES NO If yes, when?

Have you ever been convicted of a felony? YES NO If yes, explain: (Name) (Phone) (E-mail)

In case of emergency notify:

If related to anyone in our employ, state name: Referred by:

### Education

High School: Address: YES NO  
From: To: Did you graduate? Degree:

College: Address: YES NO  
From: To: Did you graduate? Degree:

Other: Address: YES NO  
From: To: Did you graduate? Degree:

Subjects of special study or research work:

Are you Bilingual? Language(s)

### References

(Give the names of three persons not related to you, whom you have known for at least one year.)

Full Name: Relationship:  
Company: Phone: ( )  
Address: E-mail

Full Name: Relationship:  
Company: Phone: ( )  
Address: E-mail

Full Name: Relationship:  
Company: Phone: ( )  
Address: E-mail

**Previous Employment**

Company: \_\_\_\_\_ Phone: (     )  
Address: \_\_\_\_\_ Supervisor \_\_\_\_\_ E-mail: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference?      YES      NO  
        

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Company: \_\_\_\_\_ Phone: (     )  
Address: \_\_\_\_\_ Supervisor \_\_\_\_\_ E-mail: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference?      YES      NO  
        

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Company: \_\_\_\_\_ Phone: (     )  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference?      YES      NO  
        

**Additional Skills and/or Experience**

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**Disclaimer and Signature**

**Important Notice: Employment at CHIP is AT WILL**

*I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. I understand that employment at CHIP is will for the employer and the employee.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_