



Employment Application

Please Print

Date Last Name First Name Middle

Present Address

No. & Street City State Zip Code

Business Phone Home Phone Email Address

Employment Desired

Position applying for: _____

If hired, what date can you start work? _____

.....

Personal Information

How did you hear about our company and this job opening? _____

Have you ever applied to or worked for CHIP before? Yes No

If yes, when? _____

Why are you applying for work at CHIP? _____

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and skill and agility tests.)



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Are you related to anyone in our employ or on the CHIP Board of Directors? Yes No
 If yes please state their name and your relation to them:

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, or morale, or if doing so could create conflicts of interest.

Education, Training, Experience

School	Name and Address	No. of years Completed	Did you Graduate?	Degree or Diploma
High School	_____ Name _____ Address _____ City State Zip Code	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College/ University	_____ Name _____ Address _____ City State Zip Code	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Vocational/ Business	_____ Name _____ Address _____ City State Zip Code	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Do you have any other experience, training, qualifications, or skills that you feel make you especially suited for work at CHIP? Yes No
 If so, please explain:



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Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

Name of Employer

Phone Number

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip Code

Dates of Employment _____
From _____ To _____

Your Position and Duties

Reason for Leaving

Current Employer? Yes No May we contact this employer for a reference? Yes No

.....

Name of Employer

Phone Number

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip Code

Dates of Employment _____
From _____ To _____

Your Position and Duties

Reason for Leaving

Current employer? Yes No May we contact this employer for a reference? Yes No



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Your Position and Duties

Reason for Leaving

Current Employer? Yes No

May we contact this employer for a reference? Yes No



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References

List below three persons not related to you who have knowledge of your work performance within the last three years.

_____	_____	_____	
First Name	Last Name	Phone Number	
_____	_____	_____	
Address & Street	City	State	Zip Code
_____	_____		
Occupation	No. of Years Acquainted		

_____	_____	_____	
First Name	Last Name	Phone Number	
_____	_____	_____	
Address & Street	City	State	Zip Code
_____	_____		
Occupation	No. of Years Acquainted		

_____	_____	_____	
First Name	Last Name	Phone Number	
_____	_____	_____	
Address & Street	City	State	Zip Code
_____	_____		
Occupation	No. of Years Acquainted		



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Please Read Carefully, Initial Each Paragraph and Sign Below

Initial

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initial

I hereby authorize Community Housing Improvement Program, Inc. to thoroughly investigate my references, work record, education and other matters related to my suitability for employment unless otherwise specified above. I further, authorize the references I have listed to disclose to CHIP any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release CHIP, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initial

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and CHIP. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or CHIP and that no promises or representations contrary to the foregoing are binding on CHIP unless made in writing and signed by me and CHIP's President/CEO.

Initial

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United State and to complete the required employment eligibility verification document form upon hire.

Date

Applicant's Signature



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Optional

This Company conducts internal background checks and may search public records. I am entitled to copies of any such public records obtained by CHIP unless I mark the check box below.

_____ If am not hired as a result of such information, I am entitled to a copy of any such records even
Initial though I have checked the box below.

“Public records” are defined by California state law and means records documenting an “arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment.” (Civil Code section 1786.53) **Any public records request performed by internal personnel employed by CHIP will only be conducted and used to the extent allowed by federal, state and local law, including any laws governing use of criminal history information.**

I waive receipt of a copy of any public record described in the paragraph above.

Date

Applicant’s Signature