Fort Smith Housing Authority 2100 North 31st Street Fort Smith, AR 72904 www.fortsmithhousing.org

Name:	Middle		
\ddress:	Middle		
Street City	State Zip Code		
Felephone #: Mobile #:	•		
Position(s) applied for:	Date of Application:		
Referral Source (Please check the appropriate category and	name the source)		
☐ Walk-in	☐ Job Fair		
Employee	☐ Staffing Agency Government Employment Agency		
Advertisement			
FSHA Website			
Other Internet	☐ Other		
☐ School			
What is the best time to reach you?	Type of employment desired:		
May we contact you at work? Yes No	☐ Full-Time ☐ Part-Time ☐ Internship		
If YES, work number and best time to call: #: time:	☐ Temporary		
	Will you relocate if job requires it? ☐ Yes ☐ No		
Have you ever submitted an application here before? ☐ Yes ☐ No	Will you travel if job requires it? ☐ Yes ☐ No		
If YES, give date(s) and position(s):	If they have been explained to you, are you able to meet the attendance requirements of the position? ☐ Yes ☐ No ☐ N/A		
Have you ever been employed here before?	Will you work overtime if required? ☐ Yes ☐ No		
☐ Yes ☐ No	If NO, please explain		
If YES, please provide the dates:			
From: To:	Driver's License #:		
Are you legally eligible for employment in this country? ☐ Yes ☐ No	State: (driving a company vehicle may be required)		
Date available for work:	Have you ever pled "guilty" or "no contest" to or been convicted of a felony?		
What is your desired salary range or hourly rate of pay?	☐ Yes ☐ No		
\$ Per	If YES, please provide date(s) and details:		

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Employment History (starting with your most recent employer; attach additional pages should you need them)

Employer	Telephone #		Month / Year Month / Year		
			Dates Employed:	to	
Street address	City	State	Compensation	(Starting)	
			□ Hourly □ Salary	ć Dor	
			Commission/Bonus/Other Compensati	\$ Per	
Starting job title/final job title			Compensation		
Starting job title, mar job title			·	(mar)	
			□ Hourly □ Salary	\$ Per	
		1	Commission/Bonus/Other Compensati	ion \$	
Immediate Supervisor and title (for most recent po	sition held)	May we	contact for reference?	No □ Later	
Why did you leave?					
Summarize the type of work performed and job res	ponsibilities.				
What did you like most about your position?					
What did you like least about your position?					
Employer	Telephor	e #	Month / Year	Month / Year	
	•		Dates Employed:	to	
Street address	City	State	Compensation		
	•				
			☐ Hourly ☐ Salary Commission/Bonus/Other Compensati	\$ Per	
Starting job title/final job title			Compensation		
Starting Job title/ilital Job title				(Tillal)	
			□ Hourly □ Salary	\$ Per	
			Commission/Bonus/Other Compensati	ion \$	
Immediate Supervisor and title (for most recent por	sition held)	May we	contact for reference? □ Yes □	No □ Later	
		iviay we		110 = 20101	
Why did you leave?					
Summarize the type of work performed and job responsibilities.					
What did you like most about your position?					
What did you like least about your position?					
Employer	Telephon	e #	Month / Year	Month / Year	
			Dates Employed:	to	
Street address	City	State	Compensation		
	•		□ Hourly □ Salary		
			Commission/Bonus/Other Compensati	\$ Per	
Starting job title/final job title			Compensation	-	
Starting job title/iniar job title			·	(Tillal)	
			□ Hourly □ Salary	\$ Per	
		1	Commission/Bonus/Other Compensati	ion \$	
Immediate Supervisor and title (for most recent po	sition held)	May we	contact for reference?	No □ Later	
Why did you leave?					
Summarize the type of work performed and job responsibilities.					
What did you like most about your position?					
What did you like least about your position?					

The Fort Smith Housing Authority is an Equal Opportunity Employer. We do not and will not discriminate in employment and personnel practices on the basis of race, sex, age, handicap, religion, national origin or any other basis prohibited by applicable law.

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Employment History (co	ntinued)				
Explain any gaps in your emp	loyment, other thar	those due to personal ill	ness, injury or disab	ility:	
If not addressed on the previo			-	?	
Skills and Qualifications					
Summarize any special trainir which you are applying:	-	•	· · · · · · · · · · · · · · · · · · ·	rming the position for	
Computer Skills (Check appro	ppriate boxes. Includ	de software titles and yea	rs of experience.):		
Word Processing:	Years:	ars: Internet:		Years:	
Spreadsheet:	Years:	_ Other: _	Ye	Years:	
Presentation:	Years:	_ Other: _	Ye	Years:	
E-mail:	Years:	_ Other: _	Ye	Years:	
Educational Background					
Starting with your most recer Name and Address of School				Major/Minor	
		Diploma Degree Certification Other Diploma Other Other Other Diploma Degree Certification Other Other	GED GED GED	inicjon, minion	
References (professional,	not personal)				
Name	Title	Relationship to You	Telepho	one Years Known	

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Related Information					
To what job related organizations (profe	essional, trade, etc.) do you belong? Positions Held	Vacua Activa			
Organization	Positions Held	Years Active			
List special accomplishments, publicatio	ns, awards, etc.				
In your current or prior job, have you ev	ver written instructions or directions to be	e followed by employees or customers?			
☐ Yes ☐ No ☐ Not Applicable					
If YES, please explain:					
Applicant Statement	on you want us to know about you?				
I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.					
I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.					
I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.					
If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's executive director.					
I also understand that if I am hired, I will be required to procomplete an I-9 Form in this regard.	ovide proof of identity and legal authority to work in the Un	ited States and that federal immigration laws require me to			
	found to be false, incomplete or misrepresented in any resp nediate discharge from the employer's service, whenever it	ect, will be sufficient cause to (i) eliminate me from further is discovered.			
DO NOT SIGN UNTIL YOU HAVE READ THE	ABOVE APPLICANT STATEMENT.				
I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.					
Signature of Applicant		Date			

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