



Laconia Housing Authority

Serving the People of the Lakes Region Since 1968

APPLICATION FOR EMPLOYMENT

Name: (First) _____ (Middle) _____ (Last) _____

Address: _____

Phone: Home: _____ Work: _____ Cell: _____

Also known by the following names (Maiden Name, etc.): _____

List previous addresses within last 5 years

Are you over 18 years of age? Yes No If no, can you supply a work permit? Yes No

Do you have the legal right to remain and work in the United States? Yes No

NOTE: You will be required to submit proof of your identity and employment authorization as a condition of employment.

Have you served in the US Armed Forces? Yes No If yes, when _____

Please list any relevant training and/or education:

Position Applied For _____ Salary Requirement _____

Available For: Full-Time Part-Time Date Available For Work: _____

If Part-Time, please state days/hours available: _____

How were you referred? News Ad LHA Employee Other: _____

GENERAL INFORMATION:

Please describe the skills you feel qualify you for employment with our organization:

Have you been employed here previously? Yes No If yes, when _____

Do you have friends or relatives employed by Laconia Housing Authority? Yes No

If yes, who and what is their relation to you? _____

Have you been convicted of a crime other than misdemeanors or summary offenses? Yes No

If yes, please explain: _____

Laconia Housing Authority is an Equal Opportunity Employer.



EDUCATION:

		Year Completed	Degree Received
High School:	Name _____	1 2 3 4	_____
	City / State _____		
College:	Name _____	1 2 3 4	_____
	City / State _____		
Other:	Name _____	1 2 3 4	_____
	City / State _____		

EMPLOYMENT HISTORY - Complete all requested information beginning with your most recent employer:

From:	To:	Employer Name:	Phone:
Address:		Immediate Supervisor:	
Job Title:		Hourly Rate/Salary:	Starting \$ _____ Per _____
Summarize position and job responsibilities:		Ending \$ _____	Per _____
Reason for leaving:			

From:	To:	Employer Name:	Phone:
Address:		Immediate Supervisor:	
Job Title:		Hourly Rate/Salary:	Starting \$ _____ Per _____
Summarize position and job responsibilities:		Ending \$ _____	Per _____
Reason for leaving:			

From:	To:	Employer Name:	Phone:
Address:		Immediate Supervisor:	
Job Title:		Hourly Rate/Salary:	Starting \$ _____ Per _____
Summarize position and job responsibilities:		Ending \$ _____	Per _____
Reason for leaving:			

REFERENCES - Provide three business references in addition to the supervisors listed above.

Name	Company Name	Telephone	Years Known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE READ CAREFULLY: I hereby certify that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge and agree that falsified information or significant omissions may disqualify me from further consideration for employment and will be considered grounds for immediate discharge if discovered at a later date. I authorize you to conduct any necessary and reasonable investigation with respect to my application, including my financial and credit records, and release my former employers, Laconia Housing Authority and its officers, agents and employees from any liability from damage caused by giving and receiving information or opinions as to my employment or character. As a condition of employment, I understand that Laconia Housing Authority may perform random credit record audits to ensure employees have not defaulted on student loan obligations. As a further condition of employment, I agree to conform to the policies and procedures of Laconia Housing Authority and understand that my employment can be terminated with or without cause, with or without notice, at any time, at the option of either Laconia Housing Authority or myself.

Signature of Applicant _____

Date _____