

RENTON HOUSING AUTHORITY

Renton, WA 98056
 Phone 425-226-1850 Fax 425-271-8319



Renton Housing Authority is an equal opportunity employer. We encourage applications from all people regardless of race, creed, color, national origin, gender, gender identity, sexual orientation, age, disability or other basis protected by federal, state and local law. Please let us know if you require accommodation to participate in the application process.

APPLICANT INFORMATION

Last Name				First			M.I.	Today's Date		
Street Address							Apartment/Unit #			
City				State			ZIP			
Phone				E-mail Address						
Date Available								Desired Salary		
Position Applied for										
Availability	Full time <input type="checkbox"/>			Part-Time <input type="checkbox"/>			Temporary <input type="checkbox"/>			
Are you legally authorized to work in the U.S.?	YES <input type="checkbox"/>		NO <input type="checkbox"/>							
Have you ever worked for this company?	YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Do you have a friend or family member who is employed by the housing authority	YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, name and relation?					

EDUCATION

High School				Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College				Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other				Address					
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree or Certificate		

DRIVING RECORD

All employees of RHA are responsible for maintaining a good and insurable driving record.

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PROFESSIONAL REFERENCES - 3

Name	Occupation / Job Title	Length of time known	Phone Number

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title			
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
MILITARY SERVICE			
Branch		From	To
DISCLAIMER AND SIGNATURE			
I certify that my answers are true and complete to the best of my knowledge.			
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.			
I authorize all corporations, companies, credit agencies, educational institutions, persons, law enforcement agencies, former employers, and military services to release information to Alliance Credit Services Inc. (dba Alliance 2020). I release them from any liability and responsibility for doing so.			
Signature			Date