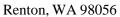
## **RENTON HOUSING AUTHORITY**



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.

APPLIC	ANT I	NFOF	RMATION													
Last Name					F	First			M.I.		Today's Date					
Street Address											Apartm	Apartment/Unit #				
City						9	State				ZIP					
Phone						E-mail Address										
Date Available											Desired Sal	ary				
Position Applied for																
Availability Full time				Part-Time	<u> </u>		Temporary									
Are you legally authorized to work in the U.S.?				YES 🗌	NO 🗆											
Have you ever worked for this company?					YES	NO		If so, when?								
Do you have a friend or family member who is employed by the housing authority					YES 🗆	NO		If so, name and relation?								
EDUCA <sup>*</sup>	TION															
High School					Add	dress										
From	om To Did you g			raduate? YE		5 🗆	NO Degree									
College						Add	dress									
From	om To Did you			raduate? Y		5 🗌	NO 🗆	Degree								
Other						Add	dress									
From		To Did you gradu			graduate?	YES		NO 🗆	Degree or Certificate							
DRIVING RECORD																
All employees of RHA are responsible for maintaining a good and insurable driving record.																
	SSION	AL R	EFERENC													
Name Occupation / Job Title							Length of time known							Phone No	umber	
PREVIOUS EMPLOYMENT																

Responsibilities													
Phone													
Supervisor													
Responsibilities													
NO 🗆													
Phone													
Supervisor													
Responsibilities													
May we contact your previous supervisor for a reference? YES NO													
MILITARY SERVICE													
DISCLAIMER AND SIGNATURE													
0													
release information to Alliance Credit Services Inc. (dba Alliance 2020). I release them from any liability and responsibility for doing so.													
Date													