## RENTON HOUSING AUTHORITY

2900 NE 10<sup>th</sup> St, PO Box 2316 Renton, WA 98056-0316 Phone 425-226-1850 Fax 425-271-8319



Renton Housing Authority is an equal opportunity employer. We encourage applications from all persons 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					Fir	rst					.I.		Today's Date		
Street Address										Ap	Apartment/Unit #				
City					Sta	ate	ate				ZIP				
Phone					E-	mail A	Address				·				
Date Available							De			Desire	esired Salary				
Position Applie	ed for														
Availability Full time				Part-Time			Temporary								
Are you legally authorized to work in the U.S.?			YES 🗌	NO								·			
				YES 🗌	NO		If so, when?								
Do you have a friend or family member who is employed by the housing authority YES				YES	NO		If so, name and relation?								
EDUCATION															
High School															
From T		0	Did you graduate?		YES		NO Degree								
College	College				Addr	ess									
From	m To I		Did you	Did you graduate?			NO 🗆	NO Degree							
Other				Addr	ess			'							
From	m To Did you		Did you	graduate? YE			NO 🗆	Degree or Certificate							
DRIVING RECORD															
All employees of RHA are responsible for maintaining a good and insurable driving record.															
PROFESSIONAL REFERENCES															
Name Occupation / Job Title Length of time known												Phone Num	nber		

PREVIOUS EMPLOYMENT										
Company			Phone							
Address			Supervisor							
Job Title										
Responsibilities										
From	То	Reason for Leaving								
May we contact yo	our previous superv	isor for a reference?	NO 🗆							
Company			Phone							
Address			Supervisor							
Job Title										
Responsibilities										
From	То	Reason for Leaving	J							
May we contact yo	our previous superv	isor for a reference?	NO 🗆							
Company			Phone							
Address			Supervisor							
Job Title			1							
Responsibilities										
From	То	Reason for Leaving								
May we contact your previous supervisor for a reference? YES NO										
MILITARY SER	RVICE									
Branch	Branch						То			
DIGGLAMATE AND CLONATURE										
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				