



Employment Application

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Applicant Information

Full Name: _____ Date: _____

Last

First

M.I.

Address: _____

Street Address

Apartment/Unit #

City

State

ZIP Code

Phone: () _____ E-mail Address: _____

Position applying for: _____ Date Available: _____ Desired Salary: \$ _____

Employment Type Desired: Full-Time ☐ Part-Time ☐ If Part-Time, hours/days available to work: _____

Are you willing to work overtime? Yes ☐ No ☐

Are you legally eligible to work in the U.S.? Yes ☐ No ☐ Are you at least 18 years of age? Yes ☐ No ☐

Have you previously interviewed or been employed with this company? Yes ☐ No ☐

If yes, provide dates & position: _____

Do you know anyone who works for this Company? Yes ☐ No ☐

If yes, who and specify relationship: _____

How did you learn about this job (circle all that apply): Job Ad Social Media Reference HHDC Website

Other: _____

Education

	<i>School Name & Location (Address/City/State)</i>	<i>Course of Study</i>	<i>Graduate?</i>	<i># of Years Completed</i>	<i>Degree/ Major</i>
High School					
College / University					
Bus/Tech/ Trade or Post College					

Professional licenses, certifications or registrations held: _____

If the position you are applying for requires that you are bilingual in Spanish, do you speak and write it fluently?



References

List the names of business or professional persons not related to you, whom you have known at least three (3) years.

Name	Title	Company	Phone or email

Employment History

List your employment history, starting with the most recent and working backwards in time. Complete even if you attached a resume. Incomplete information could disqualify you from further consideration.

1. Company: _____ () _____

Address: _____

Supervisor Name: _____ Your Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ If no, why not? _____

2. Company: _____ Phone: _____ () _____

Address: _____

Supervisor Name: _____ Your Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ If no, why not? _____

3. Company: _____ Phone: _____ () _____

Address: _____

Supervisor Name: _____ Your Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ If no, why not? _____



Military Service

Did you serve in the Military? Yes ☐ No ☐

Branch: _____ Rank at Discharge: _____

Please list any specialized training you obtained that may be beneficial to the position: _____

Disclaimer and Signature

Please read carefully before signing.

- *I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for HHDC to hire me. If I am hired, I understand that either HHDC or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of HHDC has the authority to make any assurance to the contrary.*
- *I certify with my signature below that my answers are true and complete to the best of my knowledge.*
- *I understand that if I am offered employment, I will need to pass a pre-employment background check and drug screening test.*
- *If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

HHDC is an Equal Opportunity Employer.

Signature: _____ Date _____

This organization participates in E-Verify.

For more information on E-Verify, visit <https://www.uscis.gov/e-verify> or contact DHS by phone at toll-free 1-800-375-5283 or 1-800-767-1833 (TDD for the deaf or hard of hearing)