



1300 Boulevard of the Arts  
 Sarasota, FL 34234  
 (941) 361-6210

*Building Communities • Empowering Families • Transforming Lives*

## APPLICATION FOR EMPLOYMENT

Complete all questions and sign on pages 5 & 6.  
**“SEE RESUME” is not a sufficient response to any question.**

Last Name		First	Middle	Date of Application	
Street Address				Home Telephone	
City, State, Zip Code				Work Telephone	
Position Desired		Date Available	Salary Desired	Social Security Number	
Type of Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary			Are you legally eligible for employment in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Proof of U.S. citizenship or immigration status will be required upon employment.</b>		
EDUCATION					
Level	Name and Location of School	Diploma or Degree (Credits Earned if No Degree)	Attendance Dates		Major
			From Mo/Yr	To Mo/Yr	
High School					
Business, Trade or Technical*					
College*					
Graduate School*					
Other*					
*If degree was received under a name other than that listed on this application, please provide your full name at the time the degree was awarded: Degree: _____ Name At Time Earned: _____					
Scholastic Achievements:					



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**SKILLS AND QUALIFICATIONS**

Summarize specific skills and qualifications acquired from employment or other experiences that are related to the position for which you are applying (e.g., computer skills, software applications, and foreign languages):

**EMPLOYMENT HISTORY**

Please provide a COMPLETE employment history, even if a resume is submitted with this application. List ALL employers, assignments, or volunteer activities that are relevant to the job for which you are applying, starting with the most recent, including military employment. Explain any gaps in employment in the "Comments" section below.

(1) Present/Most Recent Employer Telephone		Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other		Hourly Rate/Salary		
		Final		
Reason for leaving or why you are considering leaving?		\$	per	
If currently employed, may we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No				
(2) Next Previous Employer Telephone		Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From Mo/Yr	To Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other		Hourly Rate		
		Final		
Reason for leaving?		\$	per	



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EMPLOYMENT HISTORY CONT.				
<b>(3) Next Previous Employer</b>	<b>Telephone</b>	Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From	To	
		Mo/Yr	Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Hourly Rate		
<input type="checkbox"/> Temporary <input type="checkbox"/> Other		Final		
Reason for leaving?		\$	per	
<b>(4) Next Previous Employer</b>	<b>Telephone</b>	Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From	To	
		Mo/Yr	Mo/Yr	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	per	
Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Hourly Rate		
<input type="checkbox"/> Temporary <input type="checkbox"/> Other		Final		
Reason for leaving?		\$	per	
COMMENTS (including explanation of any gaps in employment):				
REFERENCES				
List three business/work references who are <b>NOT</b> related to you and are <b>NOT</b> previous supervisors. If not applicable, list three school or personal references who are not related to you.				
<b>Name</b>	<b>Telephone</b>	<b>Years Known</b>	<b>In what capacity did this person observe you or your work?</b>	



**PROFESSIONAL LICENSES**

List any professional license(s) that are related to the position for which you are applying and list state(s) in which licensed:

**MEMBERSHIPS**

List professional, trade, business, or civic associations that you consider relevant to the position for which you are applying (exclude memberships which would reveal sex, race, religion, national origin, age, color, or disability).

Organization	Offices Held

**SPECIAL ACCOMPLISHMENTS, PUBLICATIONS AND AWARDS**

Exclude information that would reveal sex, race, religion, national origin, age, color, or disability.

**OTHER INFORMATION**

Have you ever been convicted of, or are you now under charges for, any misdemeanor or felony offense? Omit (1) traffic fines, (2) any offense committed before your 18<sup>th</sup> birthday which was finally adjudicated in a juvenile court or under a youth offender law, (3) any conviction the record of which has been expunged under federal or state law, and (4) any conviction set aside under the Federal Youth Corrections Act or similar authority. (A yes response will not necessarily disqualify you from employment.)  Yes  No  
 If checked yes, please explain below.

If you have ever been granted a security clearance by any government agency, indicate the level of clearance, when granted, and by whom?

Have you ever had a security clearance suspended, denied, or revoked?  Yes  No

Are you bound by any non-solicitation/non-compete agreement?  Yes  No

Have you ever interviewed for a job with any of the Sarasota Housing Authority properties?  Yes  No  
 If yes, when? Where?

Have you ever been employed by any of the Sarasota Housing Authority properties?  Yes  No  
 If yes, when? Where?



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Are any relatives or friends currently employed at any of the Sarasota Housing Authority properties? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of employee(s)	Business unit where employed	
What prompted your application to Sarasota Housing Authority? (Please indicate name of ad/friend)	Ad Sarasota Housing Authority Employee	Friend Other

**PLEASE REVIEW APPLICATION CAREFULLY. WE WILL NOT CONSIDER THIS APPLICATION IF NOT COMPLETED IN FULL.**

**PLEASE READ THE FOLLOWING AND SIGN THE APPLICATION IN THE SPACES PROVIDED BELOW. IF YOU HAVE ANY QUESTIONS, PLEASE SPEAK WITH THE HUMAN RESOURCES REPRESENTATIVE BEFORE SIGNING.**

I understand that employment by Sarasota Housing Authority ("SHA") is "at will." This means that the employment relationship can be ended by me or by SHA at any time for any reason with or without advanced notice and with or without cause. It also means that SHA may revise and make exceptions to its policies, practices, handbooks, manuals, rules, procedures, and regulations, in whole or in part, at any time. I further understand that acceptance of an offer of employment does not create a contractual obligation upon SHA to continue to employ me in the future or for any specific term. Notwithstanding the above, I understand that no representative of SHA, except the executive director, has any authority to enter into any agreement of employment for a definite term. Any such agreement must be in writing and signed by the executive director.

If employed by SHA, I agree to comply with all safety and health rules, company policies and procedures, and local, state, and federal laws pertaining to my employment. Although management makes every effort to accommodate individual preferences, organizational needs may make the following conditions mandatory: overtime, rotating work schedule, or a work schedule other than Monday through Friday or normal business hours. I understand and accept these as conditions of my employment should I be hired.

I have reviewed this application carefully and I hereby affirm that my statements and answers to all questions on this application are true and correct and that I have not knowingly withheld any fact or circumstance that, if disclosed, would affect my application unfavorably. I understand that any misstatement or omission of fact on this application may result in my application not being considered, and, if employed, may result in my immediate dismissal.

**I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS:**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_



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### INVESTIGATION AUTHORIZATION

By signing below, I hereby authorize Sarasota Housing Authority to conduct an investigative report and/or reference check concerning all statements contained in my application for employment; to interview all employers, references, and other individuals and institutions to obtain information and opinions about me; and to conduct any other investigation that it deems appropriate. Such investigation may include but is not limited to my education, employment history (except my current employer if I have so indicated above), character, general reputation, driving record, credit history, and criminal record. In the event that I am employed by Sarasota Housing Authority, I hereby authorize Sarasota Housing Authority to answer any inquires regarding my employment, conduct, qualifications, and reasons for leaving.

I understand that I have the right to request Sarasota Housing Authority to disclose to me, completely and accurately, the nature and scope of the investigation. (Such a request must be made in writing to the human resources department within a reasonable time after you have completed and signed this authorization.)

In exchange for being considered for employment, I hereby release Sarasota Housing Authority, its employees, and agents, as well as any law enforcement agency, current or former employer, educational institution, credit agency, or any other individual providing information about me to Sarasota Housing Authority, from any liability arising from disclosure of such information that is obtained during said investigation.

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Signature of Applicant

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Date