

# C.A.R.E.S. Application for Employment

Complete all questions and sign on pages 4 & 5.

**“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			Email Address
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: \_\_\_\_\_

## 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):

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> Bilingual _____ | <input type="checkbox"/> Electrical Experience | <input type="checkbox"/> Plumbing Experience | <input type="checkbox"/> HVAC Experience     |
| <input type="checkbox"/> Dry wall        | <input type="checkbox"/> Trim Carpentry        | <input type="checkbox"/> Landscaping         | <input type="checkbox"/> Tile/Flooring       |
| <input type="checkbox"/> Framing         | <input type="checkbox"/> Demolition            | <input type="checkbox"/> Painting            | <input type="checkbox"/> General Maintenance |

Tools/Equipment you know how to use:

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**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.

<b>(1) Present/Most Recent Employer Telephone</b>		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				
<b>(2) Next Previous Employer Telephone</b>		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	
<b>(3) Next Previous Employer Telephone</b>		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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COMMENTS (including explanation of any gaps in employment):

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## REFERENCES

List three business/work references that are **NOT** related to you and are **NOT** previous supervisors. If not applicable, list three school or personal references that are not related to you.

Name	Telephone	Years Known	In what capacity did this person observe you or your work?

## 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:

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## 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.

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## 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

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Do you have a valid Florida Drivers License?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
We have a drug free work force policy will you be able to pass a pre-employment drug screen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
To participate in the C.A.R.E.S. Program you must complete the ROSS job skills course. Has this training been completed, if so do you have documentation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you live in Public Housing or Section 8?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you qualify as low-income? If so, list any public assistance you receive. (you will need to verify you are low-income)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What is your family Size? _____	What is your annual family income? _____	

**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 any employment as a result of this application is “at will.” This means that the employment relationship can be ended by me or by the employer at any time for any reason with or without advanced notice and with or without cause. I further understand that acceptance of an offer of employment does not create a contractual obligation with the employer to continue to employ me in the future or for any specific term.

If employed, 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.

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