

HOUSING AUTHORITY of JOLIET

6 South Broadway Street • Joliet, IL 60436 Phone 815/727-0611 • Fax 815/727-2073

Application for Employment

Should you need reasonable accommodation when completing the application form or during the selection process, contact the Human Resources Department or other designated company representative. Information provided on this application will be kept confidential and only be shared with those involved in the selection process. The Housing Authority of Joliet is an Equal Opportunity Employer. Please provide all information requested. Incomplete information may disqualify you from consideration.

GENERAL INFORMATION

Please Print. Today's Date:				· · · · · · · · · · · · · · · · · · ·
Name:(Last)	(First)	(Middle))	
Present Address:(Street)	(Apt #)	(City)	(State)	(Zip)
Telephone: ()		Alternate Number: ()	
Are you authorized to work in the U	nited States?	No		
Are you 18 years of age or older?	Yes	No		
As required by law, documents that	prove identity and eligibili	ty to work must be provid	led at time of hire.	

EMPLOYMENT DESIRED

Position(s) currently applying for:	1)	
	2)	
Do you want to work:	Full Time Part Time	Temporary
Specify days and hours available, it	f part time:	
Date available to start work:		Salary Expectations:
Are you available to work weekend	s when required by the position	you have applied for?
Have you ever been employed with	the Housing Authority of Joliet	? 🗌 Yes 🗌 No
If Yes, Dates:	Position:	Name if different than above:

EDUCATION

		High	Scho	ool	Techni	cal Col	lege		Co	llege		Gra	aduat	e Sch	nool
School Name and Location															
Years Completed (Circle)	9	10	11	12	1	2		1	2	3	4	1	2	3	4

Did You Graduate?	🗆 Yes 🗖 No			
Diploma/Degree/Certificate				

SPECIAL SKILLS / ADDITIONAL TRAINING

Please describe any special job-related skills and qualifications acquired from employment, other education or volunteer experiences, etc. Do not include experiences which would indicate race, religion, sex, national origin, genetic information, disability or age or any other status protected by law or regulation.

MISCELLANEOUS

Has your employment with any employer ever been involuntarily terminated?	🛛 Yes	🗖 No
If yes, please identify the employer(s), date of termination(s) and reason(s) for t	ermination:	

EMPLOYMENT HISTORY

(Please Start With Your Present or Most Recent Position)

Name Of Employer:	Address:
Telephone Number:	Email Address:
Dates Employed: From: To:	Name And Title Of Supervisor:
Position:	Reason For Leaving:
Beginning Hourly Rate/Salary	Ending Hourly Rate/Salary
Brief Description Of Your Work And Responsibilities:	
	If present employee, may we contact this employer?
Name Of Employer:	Address:
Telephone Number:	Email Address:
Dates Employed: From: To:	Name And Title Of Supervisor:
Position:	Reason For Leaving:
Beginning Hourly Rate/Salary	Ending Hourly Rate/ Salary
Brief Description Of Your Work And Responsibilities:	
Name Of Employer:	Address:

Name Of Employer:			Address:
Telephone Number:			Email Address:
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Position:	Reason For Leaving:
Beginning Hourly Rate/Salary	Ending Hourly Rate/ Salary
Brief Description Of Your Work And Responsibilities:	

Name Of Employer:	Address:
Telephone Number:	Email Address:
Dates Employed: From: To:	Name And Title Of Supervisor:
Position:	Reason For Leaving:
Beginning Hourly Rate/Salary	Ending Hourly Rate/ Salary
Brief Description Of Your Work And Responsibilities:	

REFERENCES

Please provide the names of three business references that are not related to you.

Name	Phone Number	Address	Years Known and In What Capacity
1.			
2.			
3.			
	•	•	

SIGNATURE

APPLICANT: Please read the following carefully before signing this application.

I certify the information given by me is true in all respects.

- I understand that the misrepresentation or omission of facts on this application, on my resume or during any stage of the hiring process may eliminate me from further consideration or if discovered after hire may result in the termination of my employment.
- I understand that the information contained in this employment application or my being invited to participate in any stage of the hiring process is NOT intended to create an employment contract between this Company and myself. If an employment relationship is established, I understand that I have the right to terminate my employment at any time, for any reason or no reason, with or without notice, and this Company has the right to terminate my employment at any time, for any reason or no reason, with or without notice. This Company's policies and procedures, including employment at-will, cannot be modified in any way without express written intent to do so by the senior business leader of this organization.
- I understand that an offer of employment is contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.
- Unless otherwise noted above, I authorize this Company and its representatives to contact my prior employers, former supervisors and company personnel, schools and all others for the purpose of verifying the information I have supplied during the selection process and for obtaining job-related information regarding my knowledge, skills, abilities, performance of duties and compliance with policies. I authorize my prior employers to provide this Company any job-related information, personal or otherwise, they may have regarding me and I release this Company and them from any liability resulting from the release of this information. I further authorize all employers, schools and other persons to provide any information or transcripts that may be requested by this Company which will be used to determine if I am qualified to perform the job duties for which I am applying.
- I understand that the company may conduct a criminal background investigation of me for the position for which I am applying and that a separate authorization to do so will be required. A conviction is not an automatic bar to consideration and/or employment

By signing below, I acknowledge that I have read and understand the above statements.



Housing Authority of Joliet

SECTION 3 RESIDENT CONCERN SELF-CERTIFICATION AND SKILLS DATA FORM

SECTION 3 RESIDENT SELF-CERTIFICATION AND SKILLS DATA FORM (Page 1 of 2)

The purpose of this form is to comply with HUD Section 3 administration and certification regulations.

Printed Name of Individual: _____

My home address is (must be a street address and NOT a P.O. Box number):

Street Address	Apt Number	City	State	Zip
Phone #:	Email Add	ress:		

I certify that I am a legal resident of the United States and meet the income eligibility and federal guidelines for a Section 3 Resident below:

To qualify as a Section 3 Resident, you must meet one of the following standards:

- 1. Be a public housing resident or a Housing Choice Voucher program participant (Section 8 rent assistance voucher) managed by HAJ; OR
- 2. Be a low income or very low income person who resides in the Joliet and whose total household income does not exceed the following amounts:

Family Size	1 Person	2 Person	3 Person	4 Person	5 Person	6 Person	7 Person	8 Person
Household Income	\$43,050	\$49,200	\$55,350	\$61,500	\$66,450	\$71,350	\$76,300	\$81,200

(Check all that apply):				
□ I am a public housing resident (Name of housing development:)				
□ I am a Section 8 rent assistance participant with HAJ (have a Housing Choice Voucher)				
□ I live in the service area of the Housing Authority (Joliet)				
My total annual household income is \$ my household.	and there are a total of	people living in		

SECTION 3 RESIDENT SELF-CERTIFICATION AND SKILLS DATA FORM (Page 2 of 2)

Graduated High School or GED □Yes □No Read & Speak English □Yes □No Graduated College, Trade, or Technical School □Yes □No Please list degree or certifications:					
Check the Skills, Trades, and/or Professions you have been employed in or contracted to do for others:					
Drywall Hanging	Drywall Finishing	□Interior Painting	□Framing	□Welding	
□н∨ас	□Electrical	□ Interior Plumbing	□Siding	□Metal/Steel Work	
□Cabinet Hanging	Door Replacement	□Trim/Carpentry	□Heavy Equipment Operator		
□Exterior Plumbing	□Exterior Framing	□Stucco	□Construction Cleaning		
□Concrete/Asphalt \ Repl.	Work □Roofing	□Landscaping	□Fencing	□Window/Door	
□Telephone Customer Service □Personal Care Aide □Receptionist □Teaching/Training					
□ Sales □Data Entry □Cleaning □Administrative/Clerical					
Driver's License Commercial Driver's License (CDL)					
□Other □Other					
□Other □Other					
I am interested in: Training opportunities Employment Opportunities Both					

I hereby certify to the U.S. Department of Housing and Urban Development (HUD) and to the Housing Authority of the City of Joliet that all of the information on this form is true and correct. I attest under penalty of perjury that my total household income and household size is as shown above, and that proof of this information may be requested in the future. If found to be inaccurate, I understand that I may be disqualified as an applicant and/or a certified Section 3 individual which may be grounds for termination of training, employment, or contracts that resulted from this certification. I also understand that failure to complete this form completely and accurately may result in other administrative remedies available to HUD. Finally, I authorize the Housing Authority to include my name on a list of Section 3 Residents seeking employment and to include my contact information so that contractors may contact me.

Signature