

# PORTSMOUTH

## REDEVELOPMENT & HOUSING AUTHORITY

*"We're Making Our City More Inviting Than Ever"*

801 Water Street – Suite 200 • P. O. Box 1098 • Portsmouth, Virginia 23705

### Application for Employment

*An Equal Opportunity Employer*

#### EMPLOYMENT / PRIVACY ACT

The Portsmouth Redevelopment and Housing Authority is an Equal Opportunity Employer and complies with the State and Federal Fair Employment Practice Laws which prohibit discrimination on the basis of an applicant's race, color, religion, national origin, sex, age, or disability. The following questions are being asked in order to determine whether the applicant possess the qualifications necessary to perform the specific job for which he or she is applying.

The information requested on this application is legally required and necessary in making a determination regarding your eligibility for employment with the Authority. Part or all of the information supplied by you may be made available to the U.S. Department of Housing and Urban Development (HUD). HUD periodically examines information regarding employees of the Authority for purposes of confirming compliance with the laws and regulations. Your signature authorizes the Authority to disseminate to HUD any and all of the information contained in this application for the purpose stated above.

#### PLEASE TYPE OR PRINT

Position(s) Applied For:	Date:
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#### PERSONAL INFORMATION

Last Name, First Middle		
Street Address		
City, State, Zip Code		
Home Phone	Business Phone	Cellular Phone
Have you ever been employed with PRHA?    Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, please give dates of employment:    From: _____ To: _____		
Position: _____		
If offered employment, when will you be available to begin work? _____		

#### GENERAL INFORMATION

Do you have any relatives currently employed with the Portsmouth Redevelopment & Housing Authority?    Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, please give name of relative and relationship to you: _____	
Do you have a legal right to work in the United States:    Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, are you able, after employment, to submit verification of your legal right?    Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you ever been convicted of a crime?    Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>(Conviction will not necessarily disqualify applicant from employment)</b>	
If yes, list charge, date, place and disposition: _____	
Do you have a valid Driver's License?    Yes <input type="checkbox"/> No <input type="checkbox"/>	
License I.D. Number _____    Issuing State _____    Expiration Date _____	



Last Name, First Middle

**EMPLOYMENT**

Begin with your current or most recent employer. Account for all periods of employment and unemployment, including military and volunteer activities. **EMPLOYMENT HISTORY MUST BE COMPLETED EVEN IF RESUME IS BEING ATTACHED.**

Company Name	Telephone Number
Street Address, City, State Zip Code	Dates of Employment – Month/Year From            To
Position Title	Starting Salary per
Name & Title of Immediate Supervisor	Ending Salary per
Description of Duties	
Reason for Leaving:	

May we contact for reference? Yes  No  If no, employment verification will be required if you are selected.

Company Name	Telephone Number
Street Address, City, State Zip Code	Dates of Employment – Month/Year From            To
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## REDEVELOPMENT & HOUSING AUTHORITY

### AUTHORIZATION TO RELEASE PERSONNEL INFORMATION

I am seeking employment with the Portsmouth Redevelopment and Housing Authority and hereby authorize my past and present employers and past and present educational institutions to release information regarding my employment or educational transcript record with same. Further, I understand that my past and present employers and past and present educational institutions are not responsible in any way for the uses made of this information by the Portsmouth Redevelopment and Housing Authority. I also release from any and all liability the Portsmouth Redevelopment and Housing Authority and its representatives for seeking such information and release from any and all liability all other persons, corporations or organizations for furnishing such information.

Should I be hired prior to the Portsmouth Redevelopment and Housing Authority's completion of verification of my employment work history, performance on the job, or education, any unsatisfactory reports, false information or omissions given by me may be considered grounds for my dismissal.

I also agree that a photographic copy of this Authorization shall be as valid as the original.

Last Name, First Middle
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Signature of Applicant	Date
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I understand and agree that any misrepresentation or omission of information in this application will be sufficient cause for cancellation of this application or if I have been employed, immediate separation from the Portsmouth Redevelopment and Housing Authority's employment. Furthermore, I understand that, just as I am free to resign at any time, the Portsmouth Redevelopment and Housing Authority reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Portsmouth Redevelopment and Housing Authority has the authority to make any assurances to the contrary.

I understand and agree that, as a condition of employment, I will undergo, at no personal expense, a medical examination by a physician of the Authority's choice prior to employment and to further medical examinations as may be required at their expense. Failure to pass such examinations may result in the revocation of my employment offer.

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

Date: \_\_\_\_\_

Last Name, First Middle	Position Applied For:
	Date:

### SUPPLEMENTAL SHEET

**To be completed if additional space is needed for employment history.**

Company Name	Telephone Number
Street Address, City, State Zip Code	Dates of Employment – Month/Year From            To
Position Title	Starting Salary per
Name & Title of Immediate Supervisor	Ending Salary per
Description of Duties	
Reason for Leaving:	

May we contact for reference?    Yes     No     If no, employment verification will be required if you are selected.

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Street Address, City, State Zip Code	Dates of Employment – Month/Year From            To
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