



APPLICATION FOR EMPLOYMENT
Bristol Redevelopment & Housing Authority
809 Edmond Street, Bristol, VA 24201
Phone: 276-642-2001 Fax: 276-642-2015

We appreciate your interest in our organization. In order to obtain a clear understanding of your background and work history, this application must be filled out accurately and completely. Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable assistance with the application and/or interview process should notify a representative of the Human Resources Department. BRHA is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

Full Name _____			Date _____	
last	first	middle		
Present Address _____			Telephone # _____	
street	city	state	zip	
Previous Address _____				
street	city	state	zip	
If hired, can you furnish proof that you are 18 years of age or, if under 18, have a permit to work? Yes No				
If hired, can you furnish proof that you are eligible to work in the United States? Yes No _____ If no, explain				
Have you ever been convicted of a felony?		Yes	No	_____
Note: Existence of a criminal record does not constitute automatic bar from employment.		If yes, list offenses and dates of conviction		
Have you ever been bonded?		Yes	No	_____
		If yes, please tell us where		
Have you served in the Military?		Yes	No	Dates _____ Type of Discharge _____
		Note: Existence of a dishonorable discharge does not constitute automatic bar from employment.		

Position Desired _____		Date you would be available for work _____	
Have you been previously employed by BRHA?		Yes	No
You were referred to BRHA by:		_____	
What is your desired salary? _____		List any relatives currently working at BRHA _____	
Do you wish to work:		Full-time Regular	Full-time Temporary Part-time Regular Part-time Temporary

Education: Circle the highest grade completed:		Grade school 1 2 3 4 5 6 7 8 High School 9 10 11 12											
		College/Trade 1 2 3 4 5 6											
Name & Location of High School:		Did you Graduate?		Type of Diploma		Notes							
Name of College, Technical or Other:		Did you Graduate?		Type of Diploma		Major		Notes					

Special Skills / Licenses	
List office equipment/software which you are proficient with: _____	
List any shop or maintenance equipment you can operate: _____	
List any professional or occupational licenses you hold: _____	
Do you type? Yes No If yes, WPM _____	

If applicable, list other occupational skills you possess: _____

Do you have a valid Driver's License? Yes No Special Chauffeurs License? Yes No

Note: For Insurance purposes, BRHA drivers are subject to a motor vehicle records check.

Have you been found guilty of a moving traffic violation in the last 3 years? Yes No

If Yes, explain fully: _____

Employment Data: Please list your past 4 employers, assignments or volunteer activities, starting with present or most recent.

Dates From: To:	Employer's Name	Position	Supervisor's Name
	Employer's Address	Duties	
	Salary starting ending	Reason for Leaving	May we contact?

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Please state what you did in any period not covered above, including unemployment, part-time or self-employment:

References:

List three persons (not former employers or relatives) who have knowledge of your character, work experience or education:

Name	Address	Phone	Occupation
Name	Address	Phone	Occupation
Name	Address	Phone	Occupation

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information given above is true, complete and correct. I understand and agree that any misrepresentation may result in a decision not to hire me, or to discharge me if discovered only after hire. I authorize BRHA to investigate all statements contained in this application that it deems necessary in arriving at an employment decision. I understand, also, that this application does not constitute an agreement or contract for employment.

I understand that BRHA does not unlawfully discriminate in employment and that no answer on this application will be used for the purpose of limiting or excusing me from consideration for employment on a basis prohibited by applicable local, state or federal law.

BRHA requires a pre-employment physical examination, including a drug screening, once a conditional offer of employment has been extended. By signing this application, I agree to the foregoing and further agree to hold BRHA harmless from any claims resulting from such physical or drug screening.

I understand that this application will remain current for 90 days, at which time it will be necessary to reapply if I wish to be considered for future employment.

I HEREBY REPRESENT AND WARRANT that **I have read and fully understand the foregoing and seek employment under these conditions of my own free will and in accordance with my own judgment.**

Signature _____ Date _____