

**HOUSING AUTHORITY OF THE CITY OF MCALLEN
APPLICATION FOR EMPLOYMENT
AN EQUAL OPPORTUNITY EMPLOYER
Drug Free and Smoke Free Workplace**

INSTRUCTIONS FOR COMPLETING THIS APPLICATION. READ CAREFULLY

To be considered for employment, please answer completely and accurately. Do not reference resume. If you require accommodation due to a disability, in order to complete the application process, please let us know what accommodation you require.

Type or print in dark ink. If you need more space for an answer, use a separate sheet of paper.

Read the recruitment announcement carefully for the position to which you are applying. Note the minimum qualifications and conditions of employment required for the position and assure you meet them prior to completing the application.

Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, and handicapped status in employment or the provision of service.

Position(s) Applied for _____ **Date of Application** _____

Last Name _____ **First Name** _____ **Middle Initial** _____

Current Address _____ **City** _____ **State** _____ **Zip Code** _____

Previous Address _____ **City** _____ **State** _____ **Zip Code** _____

Social Security # _____ **Home Phone#** _____ **Other** _____

Check One: Are you Under the age of 18? Yes _____ No _____

List all different names used for school or employment _____

Do you possess a valid Driver's License? Yes _____ No _____

State _____ **Type** _____ **License No.** _____ **Expiration Date** _____

On what date would you be available to work? _____

THE SELECTION PROCESS

Upon the close of the application period, the Personnel Department will refer the qualifying applicants received to the selecting officials for further consideration and progression to final selection.

All applicants will be notified with a letter or phone call whether they are selected for an interview.

WORK SCHEDULE

TYPE OF POSITION DESIRED

(check each box that applies to you)

Are you willing to work:

Full Time: Yes ___ No ___

Part-Time: Yes ___ No ___

Temporary: Yes ___ No ___

Comments _____

LANGUAGE SKILLS

Circle one

Language Read Speak Write Understand

English Yes Yes Yes Yes

No No No No

Spanish Yes Yes Yes Yes

No No No No

Other _____

EDUCATION: If selected to a position, a certified copy of your transcripts may be required prior to employment.

Did you graduate from High School or obtained a GED Certificate? Yes ___ No ___

If no, what is the highest grade completed? _____

Name(s) and Location(s) of Colleges

and/or Universities Attended:

Degrees Earned

From

To

Hours

Dates

Major

Minor

Mo/Yr

Mo/Yr

Completed

Graduation

Dates	Major	Minor	From Mo/Yr	To Mo/Yr	Hours Completed	Graduation

Professional certificate or license related to the job for which you are applying.

Title _____ Registration No. _____ Expiration Date _____

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TRAINING/EDUCATION

This space is for training or education that demonstrates specific qualification(s) for the particular job for which you are applying. The training or education may be full-time or part-time, apprenticeships, academic courses, seminars, or other types of training. Training schools, military schools, business colleges, or special courses pertinent to the position applied for should be included. Attach additional pages, if necessary.

Course	Institution	Dates Attended		Total Class Hours	License or Certificate Issued
		From Mo/Yr	To Mo/Yr		

EXPERIENCE

Start with your recent experience and work backward for the past ten years, if applicable. Experience may be paid or unpaid, full-time, part-time, or military. Describe all of your work experience thoroughly. Include MONTH and YEAR of your beginning and ending dates of employment or experience. Failure to provide complete information may result in disqualification of your application. If currently unemployed, please specify. Use a "Supplemental Experience" sheet if necessary.

Dates and Salary	Employer	Job Title, Duties, Hours Worked, Reason for Leaving
<u>Starting Date</u> Mo. Yr. <u>Ending Date:</u> Mo. Yr. <u>Total Time Worked:</u> Years Mos. <u>Starting Salary:</u> per <u>Ending Salary</u> per	Name: _____ Type of Company: _____ Address: _____ Telephone: _____ Supervisor's Name: _____	Number of Hours Title _____ Worked per week _____ Duties: _____ _____ Reason for leaving: _____ _____ _____

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PERSONAL DATA

1. Can you provide proof of both your identity and your right to work in the United States?
Yes ___ No ___

2. Are you currently employed by the Housing Authority of the City of McAllen? Yes ___ No ___
If yes, what department? _____

3. Have you ever been employed by the Housing Authority of the City of McAllen? Yes ___ No ___
If yes; Dates of employment _____ Under what name?

4. Do you have any relative currently employed by the Housing Authority of the City of McAllen?
Yes ___ No ___
If yes, please list name, relationship and department. (If cousin, please only indicate if first or second cousin.)

5. Are you related to any member of the Housing Authority of the City of McAllen Board of Commissioners, City Elected Officials or the Executive Director of the Housing Authority?
Yes ___ No ___
If yes, please list name, and relationship. (If cousin, please only indicate if first or second cousin.)

REFERENCES

Work Reference: Name _____
Title _____
Company _____
Company Address, City _____
Telephone _____

Personal Reference: Name _____
Profession _____
Telephone _____

Personal Reference: Name _____
Profession _____
Telephone _____

FAIR CREDIT REPORTING ACT

DISCLOSURE

This disclosure is being provided to you pursuant to the Federal Fair Credit Reporting Act (FCRA), 15 U.S. 1681 and Federal Trade Commission Regulations contained in 16 C.F.R. Part 601, Appendix C.

By this statement, the Housing Authority of the City of McAllen discloses to you that a consumer report, which may include your criminal history, driving record and other background information, may be obtained for employment purposes as part of the pre-employment background investigation to evaluate your eligibility for hire and at any time during your employment.

AUTHORIZATION

By submitting this application, I voluntarily and fully authorize the Housing Authority of the City of McAllen to obtain a consumer report as part of the hiring process. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for the Housing Authority of the City of McAllen to obtain consumer reports at any time during my employment period. Submitting this electronic application signifies that this information has been disclosed to you and that you provide authorization to the Housing Authority of the City of McAllen.

EEOC COMPLIANCE

The Housing Authority of the City of McAllen is dedicated to equal opportunity in employment without regard to race, religion, gender, sexual orientation, national origin, age, veteran or disabled status, or any other protected class. Reasonable accommodation will be made as appropriate to enable any employee or applicant for employment to safely and properly perform the job applied for as requested and as appropriate.

DISCLOSURES

Consent to Physical Testing

If you are offered employment with the Housing Authority of the City of McAllen, you may be required to submit to tests for detection of controlled substances ("drugs") or alcohol in your system. Testing procedures may include a full physical examination, may be used to determine your suitability for employment with the Housing Authority of the City of McAllen but will not be used for criminal proceedings. You may be rejected for employment with the Housing Authority of the City of McAllen should you refuse to undergo a required physical examination, blood tests, urine test, and/or breath tests, or a combination of any aforementioned procedures.

Nepotism (Relatives) Guidelines

No one may be employed or transferred into a department where a person related by blood or marriage is employed as a supervisor. For the purpose of clarification, family members would include the applicant's/employee's immediate family members and in-laws as well as, aunt/step aunt, uncle/step uncle, nephew/step nephew, niece, grandparents/step grandparents, grandchildren/step grandchildren, and first cousin/step first cousin. I understand that any misrepresentation or omission of facts concerning family members on my application or during the interview process is cause for rejection of my application or my dismissal from employment, if hired.

I understand that any oral or written statement that is false, fraudulent, or misleading in this application or any other materials, or made in the course of any related employment process, will result in rejection of my application or denial of employment. If discovered after employment, the result will be dismissal from the Housing Authority of the City of McAllen.

- I understand that employment with the Housing Authority of the City of McAllen is an at-will nature and that employment and employment processing may be terminated at any time by either party with or without notice.
- I certify that all statements contained herein are true and complete whether made by me, or others at my request.
- I understand that I must prove that I am authorized to work in the United States if I am hired.
- I authorize the employment agency to verify the employment and education information provided on this employment application. I release this company and former employer from liability for providing information relating to these references.
- I understand and agree to be subjected to preemployment drug screening check, if applicable.
- For the purpose of compliance with the Immigration Reform and Control Act, I am legally eligible for employment in the United States.
- I authorize my driving record to be checked by the Housing Authority, I understand all employees of the housing authority must have a valid Texas Drivers License, Class "C"..

AUTHORIZATION and AGREEMENT FOR RELEASE OF INFORMATION

"I certify that all of the foregoing statements are true and correct. I am willing to take a physical, and other examinations when required, and I authorize investigation from whatever source of all statements contained in this application form and all information provided by me during the applicant screening process. I understand that any misrepresentation or omission of fact on this application or during the applicant screening process is cause for rejection on my application or my dismissal from employment, if hired. The Housing Authority of the City of McAllen management retains the sole right to determine my qualifications for a position.

I understand and agree that no employee or official of the Housing Authority of the City of McAllen has any authority to alter the terms of my at-will employment through oral statements or promises, and that any agreement or promise that alters this policy must be in writing and signed by the Executive Director.

I further understand and agree that if successful in obtaining a job with the Housing Authority of the City of McAllen, as a condition of my employment with the Housing Authority, I will be subject to, and upon request will submit to, security type investigations, drug and alcohol screening, and applicable skills testing during the course of my employment.

APPLICANT CONVICTION DISCLOSURE

NOTE: Answering "Yes" to the following questions does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. (Do not include minor traffic infractions, and convictions for which the record has been sealed or expunged, any conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to and participation in any pre-trial or post-trial diversion programs in answering these diversion programs in answering these questions.)

Have you ever been convicted of a crime (Felony or Misdemeanor)? Felony Misdemeanor Neither

Explain in detail and include the City and State and any other name used at the time the convicted occurred.

Have you ever been convicted for violation of any traffic laws (do not include minor infractions)? Yes No

Explain in detail and include the City and State and any other name used at the time the conviction occurred.

Signature _____ Date _____

**Housing Authority of the City of McAllen / 1200 N. 25th St. / McAllen, Texas 78501 /
(956) 686-3951**