

CHANGE.

CHICAGO HOUSING AUTHORITY

60 E. Van Buren Street • Chicago, IL 60605 • 312.742.8500 • www.thecha.org

APPLICATION FOR EMPLOYMENT

NAME _____ Social Security # _____/_____/_____

(First, MI, Last)

POSITION DESIRED REQUISITION #	POSITION DESIRED	REQUISITION #	INSTRUCTIONS – PLEASE READ BEFORE COMPLETING THIS FORM. Please print and answer all questions fully. The filing of the application does not imply that you will be employed or that you are obligated to accept employment. It is the policy of the Chicago Housing Authority to fill each position in accordance with job-related criteria, without regard to race, color, religion, national origin, age, sex, ancestry, a non-job related disability, marital or veteran status.	
Street Address	City	State		Zip Code
Telephone Number	Alternate Phone Number	E-mail Address		
() -	() -			
Are you at least 18 years of age? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Drivers License Number _____ State _____ Exp. Date _____				
Are you legally eligible for employment in the United States of America?			<input type="checkbox"/> YES <input type="checkbox"/> NO	
Have you ever been employed at the Chicago Housing Authority?		Are you a CHA resident?	Do you live in private housing subsidized by the CHA's HCV Program?	
<input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, give dates: from ____/____/____ to ____/____/____		If yes, which development? _____		
		Are you or any member of your household a landlord in the CHA HCV Program? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No Branch of service _____			Discharge Status _____	
Professional Licenses And Registrations	Title of Licenses/Registration	Licensing Authority	License/Registration Number	

EDUCATION

a. Select highest grade completed

b. If you did not complete high school, do you have a high school equivalency diploma? Yes No

c. Select number of years of post high school education

Name and Location of Institution	Hours/Years Completed	Degree Received	Major or Specialty	Minor

Upon request, you will be required to provide proof of your educational credentials. Are you able to provide this information? Yes No

List any specialized skills and qualifications you have that may be beneficial to your career development at the Chicago Housing Authority

What computer programs can you operate?

List foreign languages and proficiency level:

Read Write Speak

Excellent Good Fair

Read Write Speak

Excellent Good Fair

Read Write Speak

Excellent Good Fair

Have you ever been discharged or asked to resign from a position? Yes No

If yes, please explain:

EMPLOYMENT HISTORY

Name and Address of Employer	Dates Employed From: ___/___/___ To: ___/___/___
_____	Salary Start: _____ End: _____
_____	<input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly

Position Held _____ Name of Immediate Supervisor _____ () _____ Telephone Number _____

Reason for leaving _____

May we contact this employer? Yes No

Brief description of duties and experience relevant to this position

EMPLOYMENT HISTORY

Name and Address of Employer _____ _____	Dates Employed From: ___/___/___ To: ___/___/___
	Salary Start: _____ End: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly
Position Held _____	Name of Immediate Supervisor _____ (_____) _____ - _____ Telephone Number
Reason for leaving _____	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Brief description of duties and experience relevant to this position _____ _____ _____	

Name and Address of Employer _____ _____	Dates Employed From: ___/___/___ To: ___/___/___
	Salary Start: _____ End: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly
Position Held _____	Name of Immediate Supervisor _____ (_____) _____ - _____ Telephone Number
Reason for leaving _____	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Brief description of duties and experience relevant to this position _____ _____ _____	

Name and Address of Employer _____ _____	Dates Employed From: ___/___/___ To: ___/___/___
	Salary Start: : _____ End: _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly
Position Held _____	Name of Immediate Supervisor _____ (_____) _____ - _____ Telephone Number
Reason for leaving _____	
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Brief description of duties and experience relevant to this position _____ _____ _____	

Do you have any relatives currently working with the Chicago Housing Authority? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list their name(s) and your relationship to them:		
Name	Relationship	
Name	Relationship	
Name	Relationship	

CRIMINAL HISTORY

Have you ever been convicted of a criminal offense? (Do not include any conviction for which records are sealed or expunged. See note below)
 YES NO

If yes, explain giving nature of offense, date, penalty, name and location of court and final disposition:

Charge(s)	Date	/ /	Penalty
Where Convicted	Disposition/Status		

NOTE: Criminal offenses include felonies, misdemeanors, and summary offenses. Examples include but are not limited to: Driving Under the Influence of Intoxicating Beverages, Drugs, Fraudulent or Bad Checks, Disturbing the Peace, Leaving the Scene of an Accident, Robbery, etc. A conviction itself does not constitute an automatic bar to employment. The seriousness of the crime, date of conviction, and relatedness to the job for which you are applying will be considered. Falsification or omission of information will affect your eligibility status as an applicant for this position and jeopardize your eligibility status for future positions.

All employees are prohibited from engaging in outside business or professional activities, which may conflict with their obligation to the Chicago Housing Authority. If you were to be employed by the Chicago Housing Authority, are there outside employment or business interests that would place you in a possible conflict of interest situation?

Yes No If yes, please explain:

I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any false statements, omissions, or misrepresentations on this application or false statements made during the employment process may be considered sufficient cause of rejection of this application or dismissal if I have been employed, no matter when discovered by the Chicago Housing Authority. I authorize investigation of all statements in this application, including, access to school records and inquiry of former employers (not including present employer unless specific approval is given). I understand that if offered a position, a condition of employment will be to take a drug and alcohol screening. If employment is obtained I will adhere to all employment practices in force at this time and that may hereafter be adopted. I understand that nothing contained in this application or conveyed during any interview that may be granted is intended to create an employment contract. I further agree that if I am hired, my employment is for no definite period of time and may be terminated at any time, without prior notice, at the option of either myself or the CHA. I further understand that no representative of the CHA has the authority to make any assurances to the contrary.

Signature _____ Date _____