

**THE HOUSING AUTHORITY OF THE CITY AND COUNTY OF DENVER  
EMPLOYMENT APPLICATION**



Housing Authority of the  
City and County of Denver  
P.O. Box 40305  
Denver, Colorado 80204-0305  
<http://www.denverhousing.org>

Received: \_\_\_\_\_

**For Official Use Only:**

QUAL: \_\_\_\_\_

DNQ: \_\_\_\_\_

Experience

Training

Other: \_\_\_\_\_

**INSTRUCTIONS FOR COMPLETING**

DHA is an equal opportunity employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

Please print or type using dark ink. Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application. Please write in print, except for the signature on the last page of this application. A resume may also be submitted, but the application form **must** be completed in the detail requested.

Please return completed application to: The Housing Authority of the City and County of Denver, Personnel Services, 777 Grant Street 2nd Floor, Denver, Colorado 80203 or fax to 720-932-3005.

--Information on this application will be verified--

**PERSONAL INFORMATION**

Position applying for: \_\_\_\_\_ Date available for work \_\_\_\_\_

Salary Requirement: \_\_\_\_\_

NAME:(Last, First, Middle)

ADDRESS:(Street, Unit Number, City, State, Zip Code)

HOME PHONE:

ALTERNATE PHONE:

EMAIL ADDRESS:

MOBILE PHONE NUMBER:

DRIVER'S LICENSE:

DRIVER'S LICENSE NUMBER:

LEGAL RIGHT TO WORK IN THE UNITED STATES?

Yes  No

State:          Number:

Yes  No

**EDUCATION**

NAME OF HIGH SCHOOL:

ADDRESS:

DID YOU GRADUATE?

Yes  No

GED CERTIFICATE  Yes  No

DATE:

LOCATION:

NUMBER:

COLLEGES/TECHNICAL SCHOOLS ATTENDED:

DATES:

SCHOOL NAME:

From:          To:

LOCATION:(City, State)

DID YOU GRADUATE?

DEGREE RECEIVED:

Yes  No

MAJOR:

UNITS COMPLETED:

DATES:

SCHOOL NAME:

From:          To:

LOCATION:(City, State)

DID YOU GRADUATE?

DEGREE RECEIVED:

Yes  No

MAJOR:

UNITS COMPLETED:

DATES:

SCHOOL NAME:

From:          To:

LOCATION:(City, State)

DID YOU GRADUATE?

DEGREE RECEIVED:

Yes  No

MAJOR:

UNITS COMPLETED:

**WORK EXPERIENCE**

(If unemployed for periods of longer than a month, please include those dates in this section. At least seven (7) years of history is required)

<b>EMPLOYER:</b>	<b>DATES:</b> From: _____ To: _____	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>COMPANY WEBSITE:</b>	<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>
<b>HOURS PER WEEK:</b>	<b>HOURLY SALARY:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>DUTIES:</b>		

**REASON FOR LEAVING:**

<b>EMPLOYER:</b>	<b>DATES:</b> From: _____ To: _____	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>COMPANY WEBSITE:</b>	<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>
<b>HOURS PER WEEK:</b>	<b>HOURLY SALARY:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>DUTIES:</b>		

**REASON FOR LEAVING:**

<b>EMPLOYER:</b>	<b>DATES:</b> From: _____ To: _____	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>COMPANY WEBSITE:</b>	<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>
<b>HOURS PER WEEK:</b>	<b>HOURLY SALARY:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>DUTIES:</b>		

**REASON FOR LEAVING:**

<b>EMPLOYER:</b>	<b>DATES:</b> From: _____ To: _____	<b>POSITION TITLE:</b>
<b>ADDRESS:</b> (Street, City, State, Zip Code)		
<b>COMPANYWEBSITE:</b>	<b>PHONE NUMBER:</b>	<b>SUPERVISOR:</b>
<b>HOURS PER WEEK:</b>	<b>HOURLY SALARY:</b>	<b>MAY WE CONTACT THIS EMPLOYER?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>DUTIES:</b>		

**REASON FOR LEAVING:**

**REASON FOR LEAVING:**

**CERTIFICATES AND LICENSES**

TYPE:	
LICENSE NUMBER:	ISSUING AGENCY:

TYPE:	
LICENSE NUMBER:	ISSUING AGENCY:

TYPE:	
LICENSE NUMBER:	ISSUING AGENCY:

**SKILLS**

**OFFICE SKILLS:** If you are an experienced operator of any business machine or equipment, including computer hardware/software, please list below. Include skill level and year last used:

DO YOU KEYBOARD?  Yes  No Words per minute: \_\_\_\_\_

OTHER SKILLS NOT LISTED ABOVE:

LANGUAGE(S): State whether reading, speaking or writing:

Additional Information

**REFERENCES**

REFERENCE TYPE:	NAME:	POSITION/RELATIONSHIP TO CANDIDATE:
ADDRESS:(Street, City, State, Zip Code)		
EMAIL ADDRESS:		PHONE NUMBER:

REFERENCE TYPE:	NAME:	POSITION/RELATIONSHIP TO CANDIDATE:
ADDRESS:(Street, City, State, Zip Code)		
EMAIL ADDRESS:		PHONE NUMBER:

REFERENCE TYPE:	NAME:	POSITION/RELATIONSHIP TO CANDIDATE:
ADDRESS:(Street, City, State, Zip Code)		
EMAIL ADDRESS:		PHONE NUMBER:

<u>Supplemental Questions</u>	
1.	Are you now or have you ever been employed by the Housing Authority of the City and County of Denver (DHA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain. (Past DHA employment)
2.	IMMIGRATION REFORM ACT: The Immigration Reform Act of 1986 requires both identity and eligibility for employment proof within three days of employment. DHA does NOT hire or sponsor H-1 Visa holders. Upon offer of employment, are you able to provide proof that you are eligible to work in the United States without sponsorship (NAFTA, Green Card, US Citizen, or Permanent Resident)? <input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Have you been fired or asked to resign from any job during the past five years? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain. (Fired or asked to resign)
4.	Have you ever been found guilty of ANY law violations other than parking tickets or juvenile offenses? Records do not cause automatic disqualification, but are reviewed as related to job(s) applied for. Be honest. If you have any convictions, list them here. If you do not remember your record, contact the appropriate law enforcement agency for this information. DHA is as interested in honest and accurate disclosure as in the record itself.  Please explain. (Law violations)
5.	Have you ever served on active duty (excluding training as a reservist or guardsman) in the U.S. Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Are you currently a DHA resident or receiving Section 8 Housing assistance? <input type="checkbox"/> Yes <input type="checkbox"/> No Please Specify:
7.	Are you a Section 3 eligible applicant? <input type="checkbox"/> Yes <input type="checkbox"/> No Please Specify:
8.	Are you related to any employee of DHA? <input type="checkbox"/> Yes <input type="checkbox"/> No Please give name and relationship:

Affidavit, Consent and Release:

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my immediate dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I agree to execute DHA's Authorization and Agreement of Release and Waiver releasing such parties from any liability in providing such information and opinions.

I understand that I may be required to successfully pass a drug screening examination. I hereby consent to a pre-and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any and all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Final decisions regarding hiring will be made by the Executive Director of the Housing Authority of the City and County of Denver and my employment may be terminated at any time with or without reason and with or without notice.

Signature \_\_\_\_\_ Date \_\_\_\_\_

This application for employment will remain active for a limited time of six months.

Additional Information

**VOLUNTEER EXPERIENCE:** Volunteer activities and non-paid experiences related to position for which you are applying should be submitted on an additional sheet.

**EDUCATION:** If you are selected for hire, a copy of your high school diploma or GED high school equivalent certificate will be required. Official transcripts of education may be required for certain positions.

**DRIVING RECORD:** If the job you are applying for requires driving, a copy of your driving record will be required prior to hire. If your driving record is not acceptable pursuant to DHA’s Personnel Policy, you may be disqualified for hire.

**NOTIFICATION:** Your application will be kept on file for six months. If you are selected for testing and interview, you will be notified as soon as possible.

**KEEP US UP TO DATE:** If your availability, address or phone number changes after you file this application, notify us immediately. Failure to do so may result in non-delivery of mail or cause your name to be removed from the applicant list.

**BACKGROUND INVESTIGATION:** New employees are investigated carefully, including national and local criminal background checks. Be sure to list any crimes for which you were found guilty within the last seven (7) years. Include any plea of guilty or nolo contendere. False statements or omissions may result in disqualification or dismissal.

In connection with your application for employment, please be advised that we may conduct a reference check. As an applicant for employment with DHA, you are a consumer with rights under the Fair Credit Reporting Act. For explanation purposes, a “consumer reporting agency” is a person or business which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer reports to others, such as DHA.

An “investigative consumer report” means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates or with others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigation requested as well as a written summary of your rights under the Fair Credit Reporting Act.

**EEOC COMPLIANCE:** Qualified applicants are considered for employment based on what they can contribute to the Housing Authority of the City and County of Denver, without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

The following data is for federally required census purposes only. It will not be used in the employment process or be part of your application. Please self identify your ethnicity (only one may be selected):

- Asian or Pacific Islander: Persons having origins in any of the peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.
- Black or African American (not of Hispanic origin): Person having origins in any of the black ethnic groups.
- Hispanic: Persons having origins in any of the Mexican, Puerto Rican, Cuban, Central or South American or other Spanish cultures, regardless of ethnicity.
- Native American or Alaskan Native: Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- Caucasian (not of Hispanic origin): Persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

PLEASE PRINT

DATE: \_\_\_\_\_ POSITION APPLIED FOR: \_\_\_\_\_

NAME: \_\_\_\_\_