



501 W Medina, Pearsall, TX 78061
 (P) 830.334.9416 (F) 830.334.8335

Employment Application

It is important that all questions be answered completely and accurately. If there is insufficient space to provide an answer, please continue on a separate sheet of paper. The Pearsall Housing Authority is an Equal Opportunity Employer. We comply with all applicable federal, state, and local laws which prohibit discrimination against qualified applicants and employees.

Personal Information

Last	First	MI
Street Address		City State Zip
SSN	Phone Number	Alternate Phone Number
Are you eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been convicted of, or plead guilty to, a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please explain:
Have you previously been employed by the PHA? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, reason for leaving:
Do you have any relatives currently employed by the PHA? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please list them:
Position applying for		Expected hourly rate

Prior Work Experience

	Current or Most Recent		Prior		Prior	
	From	To	From	To	From	To
Employer						
Address						
City, ST, ZIP						
Telephone						
Name of Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position/Job Title						
Pay						
Reason for Leaving						
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Education

	Name	Last Year Completed	Degree	Major or Emphasis
High School		9 10 11 12		
College/University		1 2 3 4		
Trade School				
Other				
List any applicable special skills, training or proficiencies.				

References

	Reference 1	Reference 2	Reference 3
Name			
Address			
City, ST, ZIP			
Telephone			

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records. I understand that if selected I may be subject to a criminal history screening and drug screening.

Signature	Date
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