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## APPLICATION FOR EMPLOYMENT

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The Alabama Housing Finance Authority is an Equal Opportunity Employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, disability, or any other status protected by law.

Please complete the following questions fully and accurately. Any falsification or deliberate misrepresentation, including omission of a material fact, or failure to complete any part of your application can be grounds for denial of employment or continued employment.

Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for your signature on the last page of the application.

### 1. GENERAL INFORMATION

Date: \_\_\_\_\_ Position Applying for : \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Are you over the age of 18?  YES  NO If not, do you have a work permit?  YES  NO

Have you ever been employed by this organization in the past?  YES  NO If YES, please provide position and dates: \_\_\_\_\_

Are you related to a current AHFA employee?  YES  NO If YES, who? \_\_\_\_\_

If hired, can you furnish proof you are eligible to work in the U.S.?  YES  NO

Can you perform the essential duties of this job (assuming that a reasonable accommodation would be made to any disability you may have)?  YES  NO

Have you ever been bonded?  YES  NO Are you bondable?  YES  NO  I DON'T KNOW

Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgment to a felony? (Conviction of a crime will not necessarily be a bar to employment. Factors such as age at the time of offense, type of offense, remoteness of the offense in time, and rehabilitation will be taken into account in determining the effect on suitability for employment.)  YES  NO If YES, please explain: \_\_\_\_\_

Are you available to work overtime when necessary?  YES  NO

When are you available to start work? \_\_\_\_\_

### 2. REFERRAL SOURCE

Temp Agency  Walk-In  Employee Referral Referred by: \_\_\_\_\_  
 Other: \_\_\_\_\_

### 3. EDUCATION/SKILLS

List Name and Address of Schools	Number of Years Completed	Diploma/ Degree/ Certification	Major/Minor
High School or GED:			
College or University:			
Vocational or Technical:			

Do you have experience using computers?  YES  NO      List types and software: \_\_\_\_\_

List other skills and aptitudes you have which would help you successfully perform this job: \_\_\_\_\_

### 4. EMPLOYMENT HISTORY

List names of your current and previous employers in consecutive order with the present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give the firm name and supply business references. This section must be completed regardless of whether or not a resume is attached.

NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	TO
CITY, STATE, ZIP CODE		PAY: START \$	FINAL \$
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING	

NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	TO
CITY, STATE, ZIP CODE		PAY: START \$	FINAL \$
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING	
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ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	TO
CITY, STATE, ZIP CODE		PAY: START \$	FINAL \$
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING	

May we contact all of the employers for references? If NO, list the employers not to be contacted and the reason.

Employer: \_\_\_\_\_ Reason: \_\_\_\_\_

Employer: \_\_\_\_\_ Reason: \_\_\_\_\_

Please explain any gaps in employment:

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**5. REFERENCES**

List the names, addresses and phone numbers of three **personal** references:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**6. WAIVER AND CONSENT RELATING TO APPLICATION FOR EMPLOYMENT**

In exchange for the consideration of my job application by the Alabama Housing Finance Authority (hereinafter called "the Authority"), I agree that:

- I authorize investigation of all statements contained in the application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Authority permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Authority from any liability as a result of such contact.
- By entering your name in the signature block below, you agree it serves as your legal signature evidencing your intent to be legally bound by this instrument, regardless how the instrument is submitted to AHFA, whether by mail, email, fax, or otherwise.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_