

APPLICATION FOR EMPLOYMENT

PLEASE READ THIS APPLICATION THOROUGHLY AND COMPLETE IT HONESTLY.
ZANESVILLE METROPOLITAN HOUSING AUTHORITY PERFORMS A DETAILED
BACKGROUND INVESTIGATION ON ALL FINAL CANDIDATES.

IMPORTANT NOTICE: If you need assistance in completing this application, please contact our administrative office. Applicants should be extremely careful as they complete this application. Zanesville Metropolitan Housing Authority utilizes a sophisticated and detailed background and pre-employment investigation process. This process frequently discloses inaccurate, false, and/or incomplete or omitted information. Should this process determine any inaccurate or incomplete information, it will result in you either being disqualified from employment with Zanesville Metropolitan Housing Authority as an applicant, or it will result in termination if the inaccuracies are discovered subsequent to your employment at Zanesville Metropolitan Housing Authority. Accordingly, Zanesville Metropolitan Housing Authority strongly suggests that you **NOT COMPLETE THIS APPLICATION UNTIL YOU HAVE THE TIME AND ACCURATE INFORMATION TO DO SO.** **Zanesville Metropolitan Housing Authority is an equal opportunity employer and will not discriminate against any employee or applicant for employment in any manner prohibited by law. If you feel you have been unfairly treated or discriminated against for any reason, please call this to the attention of the Director so that we may address your concerns.**

Employment is conditioned on the successful completion of the screening process. By signing this application, I represent that the information provided in this form is given voluntarily, may be used in filing reports required by state and federal governments and agencies, may be disclosed to others and used for any other purpose not prohibited by law. Zanesville Metropolitan Housing Authority requires all individuals who successfully complete the initial employment screening process to submit to a drug screening program, which may include the taking of blood and/or urine samples, and requires/reserves the right to require that all employees submit to drug and alcohol testing during the course of their employment. The result of such screening/testing will be initially disclosed to decision makers for Zanesville Metropolitan Housing Authority and may be the basis for disqualifying any candidate for employment and for termination during employment. Zanesville Metropolitan Housing Authority reserves the right to utilize this information in any way it deems necessary, such as but not limited to civil, criminal and administrative proceedings, and any other similar matters. By signing this application, I agree to the foregoing and further agree to hold Zanesville Metropolitan Housing Authority harmless for any claims resulting from such screening/testing for drug and/or alcohol use.

NOTE: All applicants will be required to furnish proof of identity and legal work authorization to be considered for employment.

EMPLOYMENT INFORMATION

1. Position applied for _____

Type of employment desired: Full Time Part-Time Temporary

PERSONAL DATA

2. Applicant's Full Name _____

List any other names you have used or currently use, including your name, nicknames, stage names, married names, gang names (include dates and circumstances.). Please request additional pages as necessary.

Name	Date	Type, i.e. stage name, nickname, etc.

3. Street Address _____
City/State/Zip Code _____
4. Home Telephone Number _____ Alternate Phone _____
May we contact you at work? ___ Yes ___ No. If yes, please provide your work phone number _____.
When is the best time to contact you at work? _____ at home? _____
5. Social Security Number _____

BACKGROUND DATA

6. Have you ever been convicted of a crime, had adjudication of a crime withheld, or pled nolo contendere to a crime? ___ Yes* ___ No. If yes, please state the circumstances with regard to each. (Please ask for additional paper if you need more space.)

7. Have you been arrested for any crime which has not yet been adjudicated? ___ Yes* ___ No. If yes, please state the circumstances and current status of each arrest. (Please ask for additional paper if you need more space.)

8. Have you ever committed a crime for which you were not arrested or convicted? ___ Yes* ___ No. If yes, please state the circumstances. (Please ask for additional paper if you need more space.)

***NOTE:** Answering "Yes" to any of these questions may not necessarily disqualify you from the position desired. Each action and explanation will be weighed/considered in relationship to the position for which you are applying.

EMPLOYEMENT HISTORY

9. Please list, beginning with your most recent employment (starting with your current employer), any and all prior work experience which you have had during the past 10 years. Be sure to account for any periods of unemployment. Please request additional pages as necessary.

Date (Mo and Yr)	Employer and Phone No.	Address
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OTHER QUALIFICATIONS, SKILLS AND ABILITIES

10. Have you ever applied for employment with or been employed by Zanesville Metropolitan Housing Authority (or any other Housing Authority) before? ___Yes ___No. If so, please set forth all positions held, dates of employment (which authorities/departments) and reason(s) for leaving.

11. Have you filled out an application here before? ___Yes ___No
If yes, give date(s) _____

12. Names of relatives employed by Zanesville Metropolitan Housing Authority.

13. U.S. Military Service – list branch, rank attained, dates and nature of discharge¹ _____

14. If employed by us, will you continue to receive other compensation of any kind from any other employer or entity for services to be concurrently performed on behalf of that employer or entity? ___Yes ___No

15. Please describe any other experience, abilities, skills or credentials which you feel add to your qualifications for the position sought with us:

ADDITIONAL INFORMATION

16. State the number of times you were absent from work for reasons unrelated to a disability, your own serious health condition or to care for a child, spouse, parent or dependent grandparent² with a serious health condition during the last 24 months? ____ During the last 12 months? ____

17. State the number of times you were late arriving to work for reasons unrelated to a disability, your own serious health condition or to care for a child, spouse, parent or dependent grandparent² with a serious health condition during the last 24 months? ____ During the last 12 months? ____

¹ Dishonorable discharge from the Armed Forces will not be a bar to employment. Factors such as age at the time of the offense, type of offense, remoteness of the offense and time and rehabilitation will be taken into account in determining the effect on suitability for employment.

² Required by the Muskingum County Family and Medical Leave Ordinance.

18. How many times were you disciplined at work during the last 24 months? _____
During the last 12 months? _____ by whom and for what as to each disciplinary action?
(Please request additional paper if you need more space to answer this question.)

Was the discipline justified on each occasion? ___ Yes ___ No
If not, as to each occasion you believe the discipline was not justified, please explain. (Please
request additional paper if you need more space to answer this question.)

19. Please explain, in your own words, why you want to work at Zanesville Metropolitan Housing
Authority, in what position(s), and any other information you feel should be considered in
connection with your employment application (please ask for additional paper if needed):

I UNDERSTAND that this application will only be considered "active" for 30 calendar days from the
date of application. If I have not obtained employment with Zanesville Metropolitan Housing Authority
within 30 days, but remain interested in obtaining employment with Zanesville Metropolitan Housing
Authority, I understand that I must (complete a new application/notify Zanesville Metropolitan Housing
Authority in writing of my desire for my application to be considered for an additional 30 days.)
_____(Initial)

I ALSO UNDERSTAND that all statements made by me in connection with my application for
employment may be checked by Zanesville Metropolitan Housing Authority. I authorize Zanesville
Metropolitan Housing Authority to contact my prior employers, including each of those employers listed in
paragraph no. 9, and other sources of information, regarding my background, and I hereby authorize and
direct each such employer and source of information to answer any and all questions regarding my prior
employment and background. I hereby indemnify Zanesville Metropolitan Housing Authority, each of my
prior employers listed in paragraph no. 9 above and each of the other sources of information contacted, and
agree to hold them harmless from any claims arising from this authorization and direction. ____ (Initial)

ZANESVILLE METROPOLITAN HOUSING AUTHORITY'S BACKGROUND INVESTIGATION
of each applicant may result in the preparation of an investigative consumer report which would include
information as to the applicant's character, general reputations, personal characteristics and mode of living.
Applicants may submit a written request to Zanesville Metropolitan Housing Authority for a complete and
accurate disclosure of the nature and scope of the requested investigation, I hereby release Zanesville
Metropolitan Housing Authority and any person, company or institution that provides Zanesville
Metropolitan Housing Authority information from any and all liability for any damage that may result from
the investigation, use or disclosure of such information. ____ (Initial)

I UNDERSTAND further that any misstatements or omissions in this application will result in a decision not to hire me, or to discharge me if discovered only after hire. _____(Initial).

If EMPLOYED, I agree to conform to the rules and regulations of Zanesville Metropolitan Housing Authority. (I understand that as a condition of my employment and continued employment, I will/may be required to submit to, and do voluntarily agree to submit to any testing for the presence of drugs or alcohol, and to submit to any procedure to assess my qualifications for employment.) I ALSO AGREE that just as I have, if hired, the right to terminate my employment at any time, with or without cause, and with or without notice. **Zanesville Metropolitan Housing Authority may terminate my employment at any time with or without cause or notice.** I understand that no manager or representative of Zanesville Metropolitan Housing Authority, other than the Director of Zanesville Metropolitan Housing Authority, has any authority to enter into any agreement for employment for any specified period of time or make any agreement contrary to the foregoing either now, in the past or in the future. I further understand that even such an agreement must be in writing and signed by the Director for it to be binding on either myself or Zanesville Metropolitan Housing Authority. I further understand that this supersedes any prior oral or written understanding and bars any further oral understanding to the contrary. _____(Initial)

I ACKNOWLEDGE and AGREE that if at any time I am subjected to any type of discrimination or harassment, I will contact Zanesville Metropolitan Housing Authority's Director immediately to obtain assistance in the resolution of such matters. _____(Initial)

I FURTHER ACKNOWLEDGE and AGREE that any dispute between me and Zanesville Metro Housing Authority relating to my application for employment, my employment, if hired, and/or the separation of thereof, which cannot be resolved informally, shall be resolved pursuant to the voluntary labor arbitration rules of the American Arbitration Association ("AAA") IN Muskingum County, Ohio, by an impartial arbitrator, selected in accordance with such rules, as the exclusive remedy for any such dispute, including but not limited to claims of alleged discrimination. I understand that I must submit any claim to arbitration no later than 365 calendar days following the date I became aware of the conduct constituting the alleged claim. I agree to waive my right to a jury trial over any such dispute and agree that failure to timely submit any claim to arbitration shall result in a waiver of the alleged claim. *I further agree to waive any and all claims not raised through this procedure. _____(Initial)

I HEREBY REPRESENT AND WARRANT that I have read and fully understand the foregoing and seek employment under these conditions of my own free will and in accordance with my own judgment.

Date

Applicant's Signature