



2251 Table Rock Road | Medford, OR 97501 | PH/TDD: (541) 779-5785 | Fax: (541) 857-1118

EMPLOYMENT APPLICATION

All qualified applicants will receive consideration for employment without regard to race, color, national origin, religion, age, sex, gender, sexual orientation, pregnancy, physical or mental disability, marital status, age (18 years of age or older) and an individual's juvenile record that has been expunged, protected veteran status or military service, or any other characteristic protected under applicable federal, state and/or local laws.

POSITION APPLYING FOR: _____

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

E-mail Address: _____ Contact Phone: _____

Are you eligible to work in the U.S? ☐ Yes ☐ No

Are you at least 18 years or older? ☐ Yes ☐ No

Have you ever been terminated from employment or asked to resign by an employer? ☐ Yes ☐ No

If yes, please provide company names and details _____

Are you able to perform the essential functions of the job for which you are applying either with or without a reasonable accommodation? ☐ Yes ☐ No. If no, describe the functions that cannot be performed _____

Date you can start: _____ Are you currently employed? _____

If so, may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? Walk-In _____ Advertisement _____ Referral _____ Other _____



Have you ever worked for this company before? ____ Yes ____ No If yes, when and position _____

Do you know anyone who works for our company? ____ Yes ____ No If yes, who? _____

EDUCATION:	Name/location	Years Attended	Degree/Certificate Received
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High School			
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College or University			
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Trade /Business School			
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If you are applying for a position requiring bilingual abilities, please complete this section.

Speak	Fluent _____	Good _____	Fair _____
Read	Fluent _____	Good _____	Fair _____
Write	Fluent _____	Good _____	Fair _____

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

Dates From/To: _____ Years: _____ Months: _____

Name of Employer: _____ Address: _____

Supervisor Name: _____ Contact Number: _____

Reason for Leaving: _____

Job Title: _____ Duties: _____

May We Contact Employer: ____ Yes ____ No



Dates From/To: _____ Years: _____ Months: _____

Name of Employer: _____ Address: _____

Supervisor Name: _____ Contact Number: _____

Reason for Leaving: _____

Job Title: _____ Duties: _____

May We Contact Employer: _____ Yes _____ No

Dates From/To: _____ Years: _____ Months: _____

Name of Employer: _____ Address: _____

Supervisor Name: _____ Contact Number: _____

Reason for Leaving: _____

Job Title: _____ Duties: _____

May We Contact Employer: _____ Yes _____ No

Dates From/To: _____ Years: _____ Months: _____

Name of Employer: _____ Address: _____

Supervisor Name: _____ Contact Number: _____

Reason for Leaving: _____

Job Title: _____ Duties: _____

May We Contact Employer: _____ Yes _____ No

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for?
If yes, explain. _____

Computer Skills (please describe): _____



REFERENCES: Give the names of three persons not related to you, whom you have known for at least three years and whom can speak of your work habits and behaviors, work related skill set, and experience relevant to the position for which you applying.

Name	Contact Number	Company	Years Acquainted
1			
2			
3			

Please Read Carefully

If you have any questions regarding the application, this statement, or if you need special assistance in regard to applying for this position, please ask the person who is assisting you with this application.

As an equal opportunity employer, the Housing Authority of Jackson County will strive to conduct all personnel practices and procedures, including recruitment, selection, employment, compensation, benefits, evaluations, promotions, demotions, assignments, transfers, reductions-in-force, terminations, training, education, recreational and social activities, and safety and health programs, without regard to race, color, national origin, religion, age, sex, sexual orientation, gender, gender identity, pregnancy, physical or mental disability, familial status, marital status, source of income, protected veteran status or military service, or any other characteristic protected under applicable federal, state and/or local laws.

The answers to the questions on this application are not intended for use for discriminatory purposes.

Your application will be given the equal consideration it deserves; however, our acceptance of your completed application for our consideration does not mean you will be offered employment. By signing your name below, you indicate your understanding that nothing contained in this application or any information gained or discussed during the interview process creates an employment contract between you and this Organization. If hired, you will be, at all times, an at-will employee. Should this application and the hiring process result in your employment, you have the right to terminate your employment at any time and for any reason. Likewise, the Housing Authority of Jackson County reserves the right to terminate your employment at any time and for any reason not prohibited by law.

Moreover, you understand no representative of this Agency, with the exception of the executive director, has any authority to enter into any agreement of any kind or form with you for any specified period of time or to guarantee any other terms of employment, including benefits. **No statements,**



written or verbal, made to you at any time prior to, or during, employment are intended to alter your at-will status.

When processing this application, and if applicable to the position for which you are applying, the Housing Authority of Jackson County may request third parties perform criminal background checks about you and a driving record check. Should this be necessary, you will be given separate forms to fill out authorizing any such checks and setting forth information about your rights. In addition to these background checks, the Agency may directly contact past employers, supervisors, and/or any other person listed in this application regarding the statements you make during the application process and your suitability for employment. This inquiry may include information as to your general character, reputation, and work-related characteristics.

I certify with my signature below I have given the Housing Authority of Jackson County true and complete information on this application to the best of my knowledge. I have omitted no facts called for on the application and have not made any false statements. No requested information has been concealed. I authorize the Housing Authority of Jackson County to verify the accuracy of the statements and obtain reference information on my work performance.

I understand that, if employed, any false statements or omissions of facts called for on this application could result in dismissal. I understand that should an employment offer be extended to me and accepted, I will at all times be an at-will employee. I will fully adhere to the policies, rules, and regulations of employment. However, I further understand that neither HAJC's policies, rules, regulations, nor anything said during the interview process, shall be deemed to alter the at-will nature of my employment or to constitute the terms of an implied employment contract.

Signature of Applicant:

Date:

Applicant's Printed Name: _____

***This application for employment expires 60 days after the date indicated next to your signature.
Consideration for employment after 60 days requires a new application.***

