

812 Abbey St.

Helena, MT 59601

# Helena Housing Authority Application For Employment Resume & References Required



Apply online at hhamt.org

I. Applicant Information:				
Name:				
	Last	First	M.I.	
Address:				
	Street	City	State	Zip
Mailing address:				
(if different)	Street	City	State	Zip
Home Pho	ne: ()	Work Phone:	()	
II. Emplo	yment Desired:			
Position:				
Date You C	an Start:			
Salary Desir	red:			
Are You En	nployed At This Time?		□ No	
If So, May	We Contact Your Current Employer?		□ No	

**III. Education and training:** Describe in detail your education and training with an emphasis on that which is directly applicable to the position for which you are applying. If you respond on separate sheets of paper, ensure you write your name and the job title for which you are applying on each sheet.

Education – Enter the highest year completed:

High school name and address: \_\_\_\_\_

Current Employer:

Did you receive a diploma or equivalency?	$\Box$ Yes	□ No - if no, enter highest grade completed:
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	/		
College, university, or technical school, or	Degree or certificate earned	Major/Minor Field	Credits
training name and location			earned

<b>IV. Employment History:</b> List all your employment and/or volunteer experience within the last 10 years with an emphasis on experience that is relevant to the position for which you are applying. <b>Begin with your current or most recent experience.</b> To submit additional work history, please use HHA's 'Additional Employment History' form, which can be found on the HHA website (www.hhamt.org) under the 'Application' section of the 'Employment' page.				
Current				
employer name and complete				
address				
	duties:			
Dates employed:	to	Total time employed: (years/months)  □ Full time □ Part-time □ Volunteer		
Supervisor: Name	e Phone	Mailing address		
Reason for leaving		Maning address		
	-			
Employer name				
and complete				
address				
Your job title and	duties:			
Dates employed:	to	Total time employed: (years/months) □ Full time □ Part-time □ Volunteer		
Supervisor:				
Name	e Phone	Mailing address		
Reason for leaving	y.			

IV. Employment His	story (cont	inued):		
Employer name				
and complete				
address				
Your job title and dutie	es:			
-				
Dates employed:	to _		Total time employed:	
			$\Box$ Full time $\Box$ Part-time $\Box$ V	olunteer
C				
Name		Phone	Mailin	g address
Reason for leaving:				8
Employer name				
and complete				
address				
Your job title and dutie				
-				
Dates employed:	to		Total time employed:	(voors/months)
Dates employed.	10		$\Box$ Full time $\Box$ Part-time $\Box$ V	
				orunteer
Supervisor:				
Name		Phone	Mailin	g address
Reason for leaving:				
V. Current professional licenses, registrations, or certifications:				
Licensing agency name	/location	Type of License	Endorsement/Restriction	Date licensed & expiration

#### VII. Professional references:

Please list at least three professional references that you have worked with one year or longer (other than the former employers listed in section IV):

Name:	Mail address:	Phone #:
Name:	Mail address:	Phone #:
Name:	Mail address:	Phone #:

# VIII. Driving and Criminal Record:Do you have a current valid Drivers License?YesNo

Have you ever been convicted of a felony?  $\Box$  Yes  $\Box$  No

#### IX. Section 3 - Hiring Prefence:

DO YOU CLAIM PREFERENCE UNDER Section 3 of the Housing and Urban Development Act of1968?YesNoFor further details, please see page 6 of this application packet. To formally claim this<br/>preference, please complete page 6 for submission with your application materials.

### IX. Representations and Signature:

### **Equal Employment Opportunity**

The Helena Housing Authority is an equal opportunity employer and selects the best matched individual for the job based upon job related qualifications, regardless of race, color, national origin, age, physical or mental disability, marital or familial status, religion, creed, sex, sexual orientation, political beliefs, or other protected groups under State, Federal, or local Equal Opportunity Laws.

### **Reasonable Accommodation**

The Helena Housing Authority is committed to providing reasonable accommodations to applicants and employees with disabilities in accordance with federal and state laws. Reasonable accommodations are available upon request to assist applicants and employees in any of the following:

- equal opportunity in the employment process
- enable qualified individuals with disabilities to perform the essential functions of the job; and
- enable employees with disabilities to enjoy equal benefits and privileges of employment.

Applicants who need an accommodation to participate in the selection process should request the accommodation as early as possible. The Helena Housing Authority will make every effort to respond promptly to a request for accommodation.

## I understand and agree that:

- 1. Any material misrepresentation or deliberate omission of a fact in my application may be justification for refusal or, if employed, termination from employment.
- 2. It is my understanding that the HHA will make a thorough investigation of my entire work history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my being hired, or if hired, may subject me to immediate dismissal.
- 3. The Helena Housing Authority is committed to a work environment free from drugs, criminal activity and harassment. Employees of the Helena Housing Authority shall not engage in criminal activity including drug-related criminal activity while employed with the Helena Housing Authority. Involvement in such criminal activity shall be cause for immediate dismissal. Employees of the Helena Housing Authority will be provided with anti-harassment training and must commit to a work place free from harassment.
- 4. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a work schedule other than Monday through Friday. I understand and accept these as conditions of my continuing employment.

I further understand that this is an application for employment and that no employment contract has been offered.

I understand that if I am employed, such employment is for no definite period of time and that the HHA can change wages, benefits, and conditions at any time.

I have read and understand the information above:

#### SIGNATURE

DATE



## **RESIDENT EMPLOYMENT OPPORTUNITY DATA**

#### SECTION 3 – ELIGIBILITY FOR PREFERENCE CERTIFICATION

#### What is Section 3?

Section 3 is a provision of the Housing and Urban Development (HUD) Act of 1968 that helps foster local economic development, neighborhood economic improvement, and individual self-sufficiency. The purpose of Section 3 is to ensure that employment and other economic opportunities generated by certain HUD financial assistance shall, to the <u>GREATEST EXTENT FEASIBLE</u>, and consistent with existing Federal, State, and local laws and regulations, be directed to low and very-low income persons, particularly those who are recipients of government assistance for housing and to business concerns which provide economic opportunities to low and very-low income persons. 24 CFR 135.1.

You may be eligible for a hiring preference if you are currently a Housing Authority client, including a Housing Choice Voucher (HCV)/Section 8 participant or a Public Housing resident <u>or</u> you live within the Helena area and are considered a "low-income" family or individual. This preference is provided by 24 CFR Part 135, with "Section 3 resident" being further defined in §135.5.

If you wish to qualify for the Section 3 preference, you must submit the information requested below. <u>Your response is voluntary</u>. If you do not want to submit this information, your eligibility for employment will not be affected. =

Name:					
	First	Middle	Last		
Address:					
	Number	Street	City, State, Zip Code		
Are you currently employed?YesNo					

If yes, company/employer name:\_\_\_\_\_

Please review the table below to see if you qualify for a Section 3 hiring preference based upon Median Family Income levels in Lewis & Clark County:

Number of Persons in Household	Gross Household Income (80% of Median Family Income)	Gross Household Income (50% of Median Family Income)
1	\$58,350	\$36,450
2	\$66,650	\$41,650
3	\$75,000	\$46,850
4	\$83,300	\$52,050
5	\$90,000	\$56,250
6	\$96,650	\$60,400
7	\$103,300	\$64,550
8	\$110,000	\$68,750

Please enter the total number of person(s) in household including yourself: \_\_\_\_\_ AND the Total gross annual income for household: \$\_\_\_\_\_\_

Please check if you are currently a:

Public Housing Resident:	 w/	_ (City, State)
HCV Participant:	 w/	(City, State)

I certify that the statements made on this sheet are true, complete, and correct to the best of my knowledge and belief, and made in good faith. I also acknowledge that, if requested by HHA, I am obligated to submit evidence that I qualify for this preference. *Examples of this include a copy of your lease, receipt of public assistance, or evidence of participation in a public assistance program.* 

Applicant's Signature:

Date: