Position Applying For: Maintenance/Mowing	sville Housing Aure	Date:				
Rogersville Church Hill Rutledge	odersville Housing Authonic podersville rouses 902 Locust St. Rogersville, TN 37857	TEL 423-272-8540 FAX 423-272-4710 TTY 1-800-848-0298				
Personal Data						
Name (please print):	First	Middle				
City:		Zip code:				
Phone: Text: 0						
Have you ever been employed here before? 🗆 Yes 🗅 No 🛛 If yes, give dates						
Are you employed now? Ves No If yes,	may we contact your present employer as to work per	formance? 🛛 Yes 🗆 No				
Do any relatives/friends work here or are you related to anyone affiliated with Rogersville Housing Authority?						
If hired, can you provide evidence/proof of your legal right to live and work in this country? 🛛 Yes 🗅 No						
If hired, on what date would you be available for work?						
Have you been convicted of a felony within t	the last 7 years? 🖸 Yes 📮 No If yes, please explain	·				
Veteran of the U.S. Military? Ves No	If yes, branch of service:					
Do you possess a valid Motor Vehicle Operator's License (Driver's License)?						
If hired, do you have a reliable means of transportation to and from work? \Box Yes \Box No						
If required, would you be willing to have a physical examination for this position? \Box Yes \Box No						
Education: High School Diploma/GED or equivalent: □ Yes	D No					
High School City	College/University	Degree				
List any Certifications (electrical, welding, h	neat and air, etc.):					
Special Skills, Qualifications and Trainin	ıg:					
Experience with (Check all that apply.):						
	Leaf blower Chainsaw Hammer measure, etc.) Drywall Tile Painting Cordless Tools					
Summarize special skills and qualifications acquired from employment or other experience and how they will benefit you in this position:						
Activities						

If any, please list professional, trade business, or civic activities and offices held.____

Employment Experience

Start with your present or last job, include military service assignments and volunteer activities. Attach additional sheet if needed.

Employer:	Date Employed	Job Title:	
Address:	From:	Work Performed:	
Phone:	То:		
Supervisor:			
Reason for Leaving:		May we request employment information? 🛛 Yes 🕒 No	
Employer:	Date Employed	Job Title:	
Address:	From:	Work Performed:	
Phone:	То:		
Supervisor:			
Reason for Leaving:		May we request employment information? 🛛 Yes 🕒 No	
Employer:	Date Employed	Job Title:	
Address:	From:	Work Performed:	
Phone:	То:		
Supervisor:			
Reason for Leaving:		May we request employment information? 🛛 Yes 🖓 No	

References List three references who are familiar with the quality of your work, and who are NOT related to you.

1. Reference			
Name	Address		_City/State
Phone (Cell/Home):		Email:	
2. Reference			
Name	Address		_City/State
Phone (Cell/Home):		Email:	
3. Reference			
Name	Address		_City/State
Phone (Cell/Home):		Email:	

Applicant's Statement

PLEASE READ and SIGN BELOW: APPLICANT CERTIFICATION, AUTHORIZATION and UNDERSTANDINGS

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge and that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I understand that nothing contained in the application or conveyed during any interview which may be granted is intended to create an employment contract between me and the Rogersville Housing Authority. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Rogersville Housing Authority, and that no promises or representation contrary to the foregoing are binding on the Rogersville Housing Authority unless made in writing and signed by me and the Rogersville Housing Authority's designated representative.

Applicant's Signature: ____

Date:

The Rogersville Housing Authority is an Equal Opportunity Employer. No person shall be excluded from being considered for employment for the Rogersville Housing Authority based on the grounds of race, color, sex, religion, national or ethnic origin, familial status, sexual preference, gender identity or disability.