



EMPLOYMENT APPLICATION

An AA/EEO Employer

Housing Authority of the County of Marin
4020 Civic Center Drive
San Rafael, California 94903

415/491-2525
FAX 415/479-3305
TDD 1-800-735-2929

PRINT LAST NAME

INSTRUCTIONS TO APPLICANT: Please begin by printing your last name along the left side of the application. Type or use black ink when completing the application. Incomplete or illegible applications will not be considered. Resumes are not accepted in lieu of any part of the standard or supplemental applications. Do not write "see resume" as a response to any application question. Applications must be received in the Marin Housing office **no later than 4:00 p.m.** on the application deadline date shown on the job announcement. Postmarks are not accepted. Make copies of any application materials you wish to keep before you submit your application. Submitted application materials will not be returned.

EXACT JOB TITLE APPLYING FOR: _____

PERSONAL DATA EMAIL ADDRESS _____

Name

(Last) *(First)* *(Middle Initial)*

Mailing Address _____

City _____ State _____ Zip Code _____

Home Telephone (____) _____ Business Telephone (____) _____

TYPE OF EMPLOYMENT (CHECK AT LEAST ONE BOX)

Regular, Full-Time Regular, Part-Time Extra-Hire (Temporary)

Are you currently employed by Marin Housing as a regular (not extra-hire) employee? Yes No

Are there any departments where you do NOT want to work? Yes No

If Yes, please specify: _____

MILITARY SERVICE

Veteran of U.S. Armed Services? Yes No DD-214 Attached? Yes No

If a Veteran, please list dates of Active Service: _____

BILINGUAL ABILITY CIRCLE APPLICABLE SKILL(S)

Please list languages (other than English) in which you are **fluent**.

1. _____ Read Write Speak

2. _____ Read Write Speak

OFFICE USE ONLY		DATE RECEIVED
Analyst _____	Reasons for rejection (circle one)	
Accepted _____ Rejected _____	No SAF Late Education	
Typing Speed (nwpn) _____	Incomplete No DMV Experience	
	Other: _____	

EDUCATION / BACKGROUND Please read the requirements section on the job announcement before completing this section.

EDUCATION AND EXPERIENCE					
High School Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, Passed High School Equivalency Tests? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name and Location of College or University	Course of Study	Degree Award	Dates Attended	Units Completed	Did You Graduate?
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attending
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attending
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attending
Business, Correspondence, Trade or Service Schools					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Attending
If the position for which you are applying has specific course requirements indicated on the job announcement, list the course(s) which satisfy these requirements.					
Please list currently valid certificates of professional or vocational competence, licenses and expiration dates. (Include date of completion if requested on the job announcement flyer.)					
Title _____		Issuing Agency _____			
Date Issued _____		Expiration Date _____		ID # _____	
Title _____		Issuing Agency _____			
Date Issued _____		Expiration Date _____		ID # _____	

ADDITIONAL PERSONAL INFORMATION

As an adult, have you ever been convicted of a felony? Yes No Date(s) _____

If Yes, please explain charges and circumstances _____

Conviction is not an automatic bar to employment. Each case is reviewed on the basis of job relatedness.

Have you ever been discharged or resigned in lieu of discharge? Yes No

If Yes, Please explain: _____

Are you at least 18 years of age? Yes No If No, please attach a copy of your work permit.

Are you a U.S. citizen, or legally authorized to work in the United States? Yes No

At the time of appointment, all new employees will be required to furnish documentation verifying their identity and authorization to work in the United States.

Are any relatives currently employed by Marin Housing? Yes No

If Yes, please list relative's name and relationship _____

EMPLOYMENT HISTORY: Please list all job-related experience beginning with your most current employer. Include volunteer assignments, on-the-job training and military service if these experiences are relevant to the position for which you are applying. To list additional employers, copy this page and attach to application.

A M O S T C U R R E N T	Name and Address of Organization			From		To	
				Month	Year	Month	Year
				# of Hrs. Worked per Week _____			
	Position Title	Supervisor Name/Title	Telephone & Area Code	# of People Supervised _____			
Description of Your Duties							
Reason for Leaving							

B N E X T P R E V I O U S	Name and Address of Organization			From		To	
				Month	Year	Month	Year
				# of Hrs. Worked per Week _____			
	Position Title	Supervisor Name/Title	Telephone & Area Code	# of People Supervised _____			
Description of Your Duties							
Reason for Leaving							

C N E X T P R E V I O U S	Name and Address of Organization			From		To	
				Month	Year	Month	Year
				# of Hrs. Worked per Week _____			
	Position Title	Supervisor Name/Title	Telephone & Area Code	# of People Supervised _____			
Description of Your Duties							
Reason for Leaving							

D N E X T P R E V I O U S	Name and Address of Organization			From		To	
				Month	Year	Month	Year
				# of Hrs. Worked per Week _____			
	Position Title	Supervisor Name/Title	Telephone & Area Code	# of People Supervised _____			
Description of Your Duties							
Reason for Leaving							

TRAINING AND/OR SPECIAL SKILLS

- Receptionist Adding Machine Shorthand (wpm) _____ General Typing (nwpm) _____
- Bookkeeping Other _____
- Computer Experience (type) _____ Software _____
- Word Processor Experience (type) _____
- Other _____

On all positions requiring typing, a typing certificate is required and must be submitted at the time of application.

Please describe any additional information including additional training, memberships in professional organizations, certificates/licenses and/or special skills which you possess that you consider relevant to the position for which you are applying.

All conditional employment offers are contingent upon passing a pre-placement physical arranged and paid for by Marin Housing. Please indicate your consent to the physical by signing below.

Signature _____ Date _____

On all positions requiring a valid California driver's license and a satisfactory driving history, a current DMV history report is required and must be submitted at the time of application.

Driver's License No. _____ State _____ Exp. Date _____

I hereby certify that the statements in this application are true. I understand and agree that any misstatement or omission of material fact herein may cause forfeiture of my part of all rights to the Housing Authority of the County of Marin employment.

Date _____ Applicant's Signature _____

Notify Marin Housing immediately of any changes in your status after you submit your application.

AFFIRMATIVE ACTION QUESTIONNAIRE

Section 1233 of the State of California Government Code provides that applicants for employment by, and incumbent employees of, public agencies may be solicited to voluntarily declare their ethnic identification, provided this information shall be for research and statistical purposes only.

Please complete this section. It will be detached and kept separate and confidential. It will not be used in any way to make employment decisions.

A. Position _____

B. Date _____

C. Sex Male Female

D. Is your age 40 or over?
 Yes No

E. Are you a person with a disability?
 Yes No

Will you require accommodations for testing?
 Yes No

F. Ethnic Category (check only one)

- White Black
 Hispanic Asian or Pacific Islander
 American Indian or Alaskan Native

G. Indicate specific source from which you learned about the position

Newspaper (specify)

Magazine (specify)

Job Fair (specify)

Organization (specify)

Employee Referral (specify)

Marin Housing

Other (specify)

Thank you for considering Marin Housing for employment. If you are looking for an urban setting with the pleasures and conveniences of a suburb, then employment with Marin Housing is the place for you. We appreciate that you have taken the time and effort to submit an application.

Working for Marin Housing can be an exciting and challenging opportunity. Regardless of your specific employment interest, you will be in an environment where you will learn about public service and the local community.

A "housing authority" Is a Unique and Often Little Understood Agency

As the local Housing Authority of the County of Marin, Marin Housing is a public corporation, separate and distinct from county government and other county and state agencies. While we administer programs funded by the U.S. Department of Housing and Urban Development (HUD), we also are separate and distinct from HUD.

Established in 1942 by local initiative, we are governed locally by a commission consisting of the Marin County Board of Supervisors and two citizens who are public housing residents. We function under the authorization of state legislation, and state law defines our mandate to manage public housing and finance new housing development.

We administer a variety of low-income housing programs and services such as:

- ∏ assisted housing in private apartments*
- ∏ public housing*
- ∏ rehab loans to homeowners*
- ∏ first-time homebuyers program*
- ∏ housing information and referral assistance*

These programs and services are funded from many different sources – state and local government, the Marin Community Foundation and other foundations, and the federal government through the U.S. Department of Housing and Urban Development.