



Jonesboro Urban Renewal & Housing Authority

330 Union Street Jonesboro, Arkansas 72401

The Jonesboro Urban Renewal and Housing Authority is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap, family status, or national origin.

Application for Employment

Personal Information:

	Date:	Social Security #:		
Name:	Last:	First:	Middle:	
Present Address:	Street:	City:	State:	Zip:
Permanent Address:	Street:	City:	State:	Zip:
Phone Number:				
Referred By:		Are you 18 years of age or older?	Yes	No

Employment Desired:

Position Desired:		Start Date:	Salary Desired:
Are you employed now?	Yes No	If so may we inquire your present employer?	Yes No
Have you ever applied to the JURHA before?	Yes No	When?	

Education:

	Name & Location of School	Last Year Completed	Did you Graduate?	Subjects Studied & Degree(s) Received
High School		1 2 3 4	Yes No	
College		1 2 3 4	Yes No	
Trade, Business, or Correspondence School		1 2 3 4	Yes No	

General Information:

Subjects of Special Study or Research Work:	
Job Related Skills: (Typing speed, etc.)	
Activities other than Religious: (Civic, athletic, etc.)	

Former Employers:

Date (Month/Year)	Name & Address of Employer	Salary	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

References:

Name	Address	Position	Years Acquainted

Criminal Record: (if no criminal record, check here)

Charge Type	Explain (State charge, date, and details):
Felony:	
Misdemeanor:	

Authorization:

I authorize the Jonesboro Urban Renewal and Housing Authority to investigate all statements contained in this application. I understand that misrepresentation of the information requested is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without cause and without any previous notice.

Signature of Applicant

Date

Management Use Only

Application Review Date: _____ *Reviewed By:* _____

Action Taken: _____

Comments: _____
