



Low Income Housing Institute Application For Employment

LIHI is an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name

| | | | | |
|--------------|---------------|---------------|----------------|-----|
| Address | | City | State | Zip |
| Phone Number | Mobile Number | Email Address | Date of Birth: | |

If selected for employment are you willing to submit to a Pre-Employment Background Screening?

Yes No

Position

| | | |
|-------------------------------|----------------------|-------------|
| Position You Are Applying For | Available Start Date | Desired Pay |
|-------------------------------|----------------------|-------------|

Employment Desired

Full Time Part Time Seasonal/Temporary

Education

| School Name | Location | Years Attended | Degree Received | Major |
|-------------|----------|----------------|-----------------|-------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

References (Please note that all references provided, you are granting LIHI authorization to contact and obtain information regarding your employment or professional bases).

| Name | Title | Company | Phone |
|------|-------|---------|-------|
| | | | |
| | | | |
| | | | |

Employment History

| | | | |
|---------------------|-------------------|-------|-----------------|
| Employer (1) | Job Title | | Dates Employed |
| Work Phone | Starting Pay Rate | | Ending Pay Rate |
| Address | City | State | Zip |
| Employer (2) | Job Title | | Dates Employed |
| Work Phone | Starting Pay Rate | | Ending Pay Rate |
| Address | City | State | Zip |
| Employer (3) | Job Title | | Dates Employed |
| Work Phone | Starting Pay Rate | | Ending Pay Rate |
| Address | City | State | Zip |
| Employer (4) | Job Title | | Dates Employed |
| Work Phone | Starting Pay Rate | | Ending Pay Rate |
| Address | City | State | Zip |

Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my dismissal from employment.

| | |
|---------------------|-----------|
| Name (Please Print) | Signature |
| Date | |