

Submit to:  
Milford Housing Development Corp.  
977 East Masten Circle  
Milford, DE 19963  
(302) 422-8255 phone  
(302) 422-8260 fax



DATE: \_\_\_\_\_

### APPLICATION FOR EMPLOYMENT

POSITION APPLYING FOR: \_\_\_\_\_ MINIMUM SALARY REQ.: \_\_\_\_\_

**PERSONAL DATA:** NAME: LAST/ FIRST/MI \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE/ZIP \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

OWN OR HAVE ACCESS TO RELIABLE TRANSPORTATION? \_\_\_\_\_

CAN YOU FURNISH PROOF OF YOUR RIGHT TO WORK IN THE UNITED STATES? YES \_\_\_\_\_ NO \_\_\_\_\_

ARE YOU PRESENTLY EMPLOYED? YES \_\_\_\_\_ NO \_\_\_\_\_

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES \_\_\_\_\_ NO \_\_\_\_\_

LIST PROFESSIONAL ORGANIZATIONS: \_\_\_\_\_

EDUCATION: CIRCLE HIGHEST GRADE COMPLETED: 1 2 3 4 5 6 7 8 9 10 11 12 / 13 14 15 16 +

RECEIVED HIGH SCHOOL DIPLOMA OR EQUIVALENT? YES \_\_\_\_\_ NO \_\_\_\_\_

NAME AND LOCATION OF COLLEGE OR UNIVERSITY: \_\_\_\_\_ MAJOR: \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

DATES ATTENDED COLLEGE:

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ YEARS COMPLETED \_\_\_\_\_ DEGREES/TITLES \_\_\_\_\_ DATE \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

LIST UNDERGRADUATE SUBJECTS: \_\_\_\_\_

LIST GRADUATE SUBJECTS: \_\_\_\_\_

PLEASE LIST OTHER SCHOOLING, SPECIAL QUALIFICATIONS AND/OR LANGUAGE SKILLS? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**WORK EXPERIENCE: ( PLEASE LIST MOST RECENT EMPLOYMENT FIRST )**

(Please complete even if attaching a resume)

1. NAME OF ORGANIZATION: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
DUTIES \_\_\_\_\_  
MAY WE CONTACT? YES \_\_\_\_\_ NO \_\_\_\_\_

2. NAME OF ORGANIZATION: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
DUTIES \_\_\_\_\_  
MAY WE CONTACT? YES \_\_\_\_\_ NO \_\_\_\_\_

3. NAME OF ORGANIZATION: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
DUTIES \_\_\_\_\_  
MAY WE CONTACT? YES \_\_\_\_\_ NO \_\_\_\_\_

4. NAME OF ORGANIZATION: \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_  
JOB TITLE \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
DUTIES \_\_\_\_\_  
MAY WE CONTACT? YES \_\_\_\_\_ NO \_\_\_\_\_

LIST THREE PERSONS WHO ARE NOT RELATED TO YOU, AND WHO CAN FURNISH INFORMATION ABOUT YOUR JOB PERFORMANCE: ALL THREE SHOULD BE PROFESSIONAL REFERENCES.

NAME	BUSINESS/ HOME ADDRESS	OCCUPATION	TELEPHONE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE ADD COMMENTS OR INFORMATION WHICH YOU FEEL WOULD BE RELEVANT TO YOUR APPLICATION:

\_\_\_\_\_  
\_\_\_\_\_

I attest and affirm that all information declared on this application is true and accurate to the best of my ability and I understand that if I have knowingly falsified any information, it will be immediate cause for dismissal if employed. I also understand that direct deposit of pay is a condition of employment. Failure to agree to Participate in direct deposit will result in the withdrawal of offer of Employment

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR EMPLOYER ONLY:

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**E.O.E.**