**Applicant Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  |  |  |
|  | *Last* | *First* | *M.I.* |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Street Address: |  |  |  |
|  | *Number* | *Street* | *Apartment/Unit #* |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | *City* | *State* | *ZIP Code* |

|  |  |  |  |
| --- | --- | --- | --- |
| Mailing Address: |  |  |  |
|  | *Number* | *Street* | *Apartment/Unit #* |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | *City* | *State* | *ZIP Code* |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email: |  |

**COMPLETED APPLICATIONS CAN BE DROPPED OFF AT HARRISON HOUSING AUTHORITY, 788 HARRISON AVE., ADMIN. OFFICE, HARRISON, NJ OR**

**EMAIL TO:** [**rlucas@harrisonhousing.com**](mailto:rlucas@harrisonhousing.com)

**Position Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Position of Interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Availability: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |
| Would you be interested in temporary employment? | YES | NO |  |
| Do you possess any relevant licenses, certifications, or registrations? | YES | NO | Identify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**General Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Are you either a U.S. Citizen or an alien authorized to work in the United States | YES | NO |  |
| Are you 18 years of age or older? | YES | NO |  |
| Do you possess a valid driver’s license? | YES | NO | State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  DL No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you fluent in any other languages and willing to communicate in those languages on the job? | YES | NO | Language(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you a veteran? | YES | NO | Branch: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Have you ever previously been employed by the Housing Authority of the Town of Harrison? | YES | NO | Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Have you ever previously applied for employment with the Housing Authority of the Town of Harrison? | YES | NO | Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Are you related to anyone currently working for the Housing Authority of the Town of Harrison? | YES | NO | Name and relationship:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Have you ever used any other name(s) different from the name listed above? | YES | NO | Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Education**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **School Name and Address** | **Years Attended** | **Did you graduate?** | | **Degree Received** | **Major** |
| High School: |  | YES | NO |  |  |
| College or University: |  | YES | NO |  |  |
| Graduate School: |  | YES | NO |  |  |
| Other Formal Training: |  | YES | NO |  |  |

**Employment**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employer Name and Address** | | From  (MM/YYYY) | TO  (MM/YYYY) | Type of Employment  Full Time  Part Time | Reason for Leaving |
| Job Title | Supervisor Name and Phone | | Description of Duties | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employer Name and Address** | | From  (MM/YYYY) | TO  (MM/YYYY) | Type of Employment  Full Time  Part Time | Reason for Leaving |
| Job Title | Supervisor Name and Phone | | Description of Duties | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employer Name and Address** | | From  (MM/YYYY) | TO  (MM/YYYY) | Type of Employment  Full Time  Part Time | Reason for Leaving |
| Job Title | Supervisor Name and Phone | | Description of Duties | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employer Name and Address** | | From  (MM/YYYY) | TO  (MM/YYYY) | Type of Employment  Full Time  Part Time | Reason for Leaving |
| Job Title | Supervisor Name and Phone | | Description of Duties | | |

|  |  |  |  |
| --- | --- | --- | --- |
| May the Housing Authority contact all previous employers / supervisors? | YES | NO | Exception(s):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**References**

*Please list three professional references.*

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |

**Disclaimer and Signature**

***I understand that, in connection with my application for employment, the Housing Authority may conduct background check(s) regarding my criminal history, driver history, and all other relevant matters. I further understand that the Housing Authority may reject my application for employment based upon the results of any such background check(s).***

***I authorize my former employers to release any information they may have concerning my employment record and I release the Housing Authority and all previous employers listed above from all liability whatsoever that may issue from securing this information. I further authorize representatives of the Housing Authority to verify any and all information contained in this application.***

***I CERTIFY that the information on this application is complete and accurate, to the best of my knowledge. I understand that any misleading or incorrect information may render this application void and be just cause for immediate termination if employed.***

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

**Disclosure**

**Regarding Background Check**

The Housing Authority of the Town of Harrison (the “Authority”) may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a “consumer report” which may include information about your criminal history and/or motor vehicle driver history. The Authority reserves the right to take adverse action against you based in whole or in part upon any information contained within such consumer report.

**Acknowledgement and Authorization**

I have read the above disclosure and hereby authorize the Authority to obtain “consumer reports” regarding my criminal history and/or motor vehicle driver history at any time after receipt of this authorization and throughout my employment. I understand that, in order to ensure proper identification, I am required to provide the below personal identifiers. I further understand that this information will be used for the purpose of performing a lawful criminal history background check and/or lawful motor vehicle driver history check in connection with the employment process and will not be used for any other purpose.

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

Applicant Signature Date

***(Please print legibly)***

1. **Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

First Middle Last Maiden (if applicable)

1. **Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street or P.O. Box City State Zip

1. **Email Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **Date of Birth**: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_
3. **Sex:** \_\_\_ Male \_\_\_ Female \_\_\_ Both
4. **Race**: \_\_\_ Asian or Pacific Islander \_\_\_ Black \_\_\_ American Indian or Alaska Native

**\_\_\_** White \_\_\_ Unknown

1. **Social Security Number**: \_\_ \_\_ \_\_\_ - \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_
2. **Telephone Number**: (\_\_ \_\_ \_\_) \_\_ \_\_ \_\_ - \_\_ \_\_ \_\_ \_\_

**EMPLOYER**:

Housing Authority of the Town of Harrison (“HHA”)

**JOB TITLE**:

Director of Administration

**DATE POSTED**:

**April 13, 2025**

**APPLICATION DEADLINE**:

**April 25, 2025**

**AGENCY OVERVIEW**:

The HHA is a public housing authority that provides quality, affordable housing to low-income families and seniors through its Public Housing program (268 units). The HHA has twelve (12) employees. The HHA is overseen by an independent Board of Commissioners (the “Board”).

**JOB OVERVIEW**:

The HHA is seeking to hire a highly qualified **Director of Administration**. The successful applicant will primarily work from the Housing Authority property located at 788 Harrison Avenue, Building 1, Harrison, New Jersey 07029.

**QUALIFICATIONS**:

* Three (3) or more years’ experience in HUD multifamily housing management (preferred).
* Must be able to assist in interpreting, implementing, and administering the policies of the Board of Commissioners and all applicable federal and state housing regulations.
* Has never, at any time, been suspended, debarred, declared ineligible, or voluntarily excluded by the Department of Housing and Urban Development, the Department of Justice, the General Services Administration, the Internal Revenue Service, or any other federal agency or the Federal Government, and/or the New Jersey Department of Labor or any other state agency or the State of New Jersey.

**SALARY**:

* Status: Full-Time
* Typical Working Hours: 9:00 a.m. to 4:00 p.m.

**APPLICATION PROCESS**:

* Interested individuals must submit an employment application (available on the HHA website) via email to Raymond Lucas, Executive Director, at [rlucas@harrisonhousing.com](mailto:rlucas@harrisonhousing.com).
* The HHA will not consider any responses that are received after the deadline or otherwise improperly submitted, or that fail to include a completed employment application.
* The HHA will provide a full job description to the applicants selected for an interview.
* The HHA reserves the right to contact applicant references and to take any other action necessary to verify any information provided by the applicant.
* The HHA reserves the right to reject any applicant who provides false or misleading information at any time during the application process.
* The HHA reserves the right to conduct a background check (including criminal history, driving record, and/or credit history) at any time following the initial interview.
  + The HHA reserves the right to reject an applicant based on the results of a background check, in accordance with N.J.S.A. 40A:12A-22.2 and applicable HHA policies.
* The HHA reserves the right to conduct pre-employment drug testing.

**The HHA is an Equal Opportunity Employer.**