



**Tester Application**  
Email completed application to [Testing@fhco.org](mailto:Testing@fhco.org)

**Applicant Information**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Mailing Address: \_\_\_\_\_  
*Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

**Emergency Contact**

*Who should we contact in case of an Emergency?*

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address (City, State, Zip): \_\_\_\_\_

\_\_\_\_\_

Phone Number(s): \_\_\_\_\_

## Demographic Information

*Note: This section aims to determine which protected classes you identify with. These items are intended to assist us in designing tests.*

**Please list how you identify in the following ways:**

Race, Ethnicity: \_\_\_\_\_

National Origin: \_\_\_\_\_

Religion: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Sexual Orientation: \_\_\_\_\_

Gender Identity: \_\_\_\_\_

Personal Pronoun(s): \_\_\_\_\_

Do you have any disabilities? \_\_\_\_\_

## Additional Questions

Do you speak any language other than English? If so, which one(s)?

\_\_\_\_\_

What are some job title(s) you currently hold or have held previously?

\_\_\_\_\_

\_\_\_\_\_

Do you have experience as a Fair Housing Tester? \_\_\_ Yes \_\_\_ No

If yes, please describe your experience:

\_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of fraud, perjury, or another felony? \_\_\_ Yes \_\_\_ No

If yes, please explain:

\_\_\_\_\_

**Current Availability**

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM							
PM							

Please list any specific dates/times that you will be unavailable

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**Disclaimer and Signature**

*I certify, under penalty of perjury, that I do not have prior felony convictions or convictions of crimes involving fraud or perjury.*

*I authorize FHCO to verify any information I have provided on this application, including a criminal records check.*

*Print Name:* ----- *Date:* -----

*Signature:* -----

**OFFICE USE ONLY**

*Application Received by:* ----- *Date:* -----