



# OCCUPANCY HEROES INCORPORATED

## Personnel Profile

Contact Name: \_\_\_\_\_

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

Cellular: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Management Co. / Owner: \_\_\_\_\_

Property and Address: \_\_\_\_\_

\_\_\_\_\_

Type of Property      A       B       C       Tax Credit       Other: \_\_\_\_\_

Desired Position(S): \_\_\_\_\_ Certified / Non-Certified: \_\_\_\_\_

Desired Start Date: \_\_\_\_\_

Job Requirements:


Are Weekends or On-Call Hours Required? : \_\_\_\_\_

Is Residing on Property a Requirement? : \_\_\_\_\_

Salary and Compensation Package:


Please List Any Special Request:


Signature of person completing this form: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Please complete and fax to **(704) 391-7446** Attention: **PLACEMENT SPECIALIST**

(City and State): \_\_\_\_\_