Standard Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a resume, but all questions must be answered.

"Employer"				Position applying for							
PERSONAL DATA Name (last, first, middle)										,	
Street Address and/or Mailing Address			City					State	Zip		
Home Telephone Number			Business Telephone Number				Cellular Telephone Number				
Date you can start work			Salary Desired			Do you have a High School Diploma or GED? Yes □ No □					
POSITION INFORM	MATION	Check all that	you are willing to work						• •		
Hours: Full Time Days Part Time Deveni			Swing Graveyard Weekends			Status: Regular 🛄 Temporary 🗖					
Are you authorized to work in the U.S. on an unrestricted			basis?	,				Yes	, 🗆	No	
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No If yes, explain:											
Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job? Yes No											
QUALIFICATIONS degrees, vocational or techr			r training you feel relate aining.	es to th	e position app	olied for t	hat would he	elp you pe	erform the wo	rk, such as	schools, colleges,
	School Name				Degree		Address/City/State				•
School											
School		_									
Other							-				
SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.											
REFERENCES PI professional references, the	lease list thre en list persor	ee professional refo nal, unrelated refer	erences not related to yo	ou, wit	h full name, a	ddress, p	hone numbe	r, and rela	ationship. If y	ou don't h	have three
Name		Address/City/State				Pho	one	F	Relationship		
							T				

WORK HISTORY Start with your present or mo	st recent employment and w	ork back. Use separate sheet if n	ecessary. (INCLUDE PAID AND UNPAID POSITIONS)
Job Title #1		(mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor	r's Name	Phone Number
City	State		Zip
Duties:	<u> </u>		L
Reason for Leaving		Starting Salary	Ending Salary
May we contact your present emplo	ver? Yes [
Job Title #2		(mo/day/yr)	End Date (mo/day/yr)
Company Name	Superviso	r's Name	Phone Number
City	State		Zip
Duties.		, , , , , , , , , , , , , , , , , , ,	
Reason for Leaving		Starting Salary	Ending Salary
Job Title #3	Start Date	(mo/day/yr)	End Date (mo/day/yr)
Company Name	Superviso	r's Name	Phone Number
City	State		Zip
Duties:			
Reason for Leaving		Starting Salary	Ending Salary
Job Title #4	Start Date	(mo/day/yr)	End Date (mo/day/yr)
Company Name	Superviso	r's Name	Phone Number
City	State		Zip
Duties			
Reason for Leaving		Starting Salary	Ending Salary
mployed, false statements, omissions or misreprese et forth in this application and release the Employe I acknowledge and understand that the co	ntations may result in m r from any liability. The mpany is an "at will" em	y dismissal. I authorize the E employer may contact any I ployer. Therefore, any empl	best of my knowledge. I understand that if I am imployer to make an investigation of any of the facts isted references on this application. oyee (regular, temporary, or other type of category any employee at any time, with or without cause, with
Applicant Signature	<u></u>	Date	

DISCLOSURE AND AUTHORIZATION PURSUANT TO THE FAIR CREDIT REPORTING ACT

PURSUANT TO THE FEDERAL FAIR CREDIT REPORTING ACT (15 U.S.C. 1681), YOU ARE ON NOTICE THAT THE CREDIT UNION MAY OBTAIN A CONSUMER REPORT (CREDIT REPORT) IN CONJUNCTION WITH YOUR EMPLOYMENT APPLICATION AND/OR DECISIONS CONCERNING YOUR EMPLOYMENT STATUS WITH THE CREDIT UNION.

YOUR SIGNATURE AT THE BOTTOM OF THIS NOTICE IS AUTHORIZATION FOR THE CREDIT UNION TO OBTAIN AND CONSULT YOUR CONSUMER REPORT FROM A CONSUMER REPORTING AGENCY IN MAKING EMPLOYMENT DETERMINATIONS, INCLUDING BUT NOT LIMITED TO EMPLOYMENT, PROMOTION, REASSIGNMENT, AND RETENTION.

YOUR SIGNATURE INDICATES THAT YOU HAVE READ THIS DISCLOSURE AND AUTHORIZATION AND THAT YOU AFFIRM ALL REPRESENTATIONS MADE HEREIN.

SIGNATURE OF APPLICANT/EMPLOYEE	DATE:
NAME OF APPLICANT/EMPLOYEE	