



JOB APPLICATION

PLEASE PRINT

We are an Equal Opportunity Employer to the full extent of all applicable laws and do not discriminate on the basis of race, color, religion, national origin, citizenship, sex, age, gender, sexual orientation, marital status, height, weight, disability or any other basis prohibited by law. Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resource Department.

POSITION INFORMATION

Position(s) applied for: _____ Date: _____

How did you hear about position? _____

PERSONAL INFORMATION

Name: _____
(First) (Middle) (Last)

Street Address: _____
(Street) (City) (State) (Zip Code)

Previous Address: _____
(Street) (City) (State) (Zip Code)

Email address: _____ Social Security Number: _____

Contact phone: _____ Best time to call you: _____

May we contact you at work? Yes No If yes, work phone: _____ Best time to call: _____

EMPLOYMENT INFORMATION

	YES	NO	
Are you legally eligible for employment in this country?			Date available for work: _____
Are you at least 18 years of age?			
Will you relocate if the job requires it?			
Will you travel if the job requires it?			
Are you able to meet attendance requirements of the position?			
Have you ever submitted an application here before?			If yes, give date(s):
Have you ever been employed here before?			If yes, give dates: from _____ to _____
Will you work overtime if required?			If no, please explain:
Have you ever been covered by a fidelity bond?			If yes, state dates and reasons:

Have you ever been denied fidelity bond coverage, had a bond carrier impose an individual deductible specifically on you, or had such coverage revoked?		If yes, state dates and reasons:
Type of employment desired:	Full-Time Part-Time Temporary Seasonal Educational Co-op	
Number of hours desired per week:	Rate of pay expected: _____ per	Hour Week Year
Driver's license number if driving is an essential job function: _____		(State)

EMPLOYMENT HISTORY

Employer	Telephone	DATES EMPLOYED		Summarize the type of work performed and job responsibilities
Address		FROM	TO	
Job Title		STARTING HOURLY RATE/SALARY		
Immediate Supervisor and Title		\$	PER	
Reason for Leaving		FINAL HOURLY RATE/SALARY		
May we contact for reference?	YES NO LATER	\$	PER	
Employer	Telephone	DATES EMPLOYED		Summarize the type of work performed and job responsibilities
Address		FROM	TO	
Job Title		STARTING HOURLY RATE/SALARY		
Immediate Supervisor and Title		\$	PER	
Reason for Leaving		FINAL HOURLY RATE/SALARY		
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Job Title		STARTING HOURLY RATE/SALARY			
Immediate Supervisor and Title		\$	PER		
Reason for Leaving		FINAL HOURLY RATE/SALARY			
May we contact for reference?	YES	NO	LATER		\$

Comments (including explanation of any gaps in employment): _____

Skills and Qualifications: _____

EDUCATIONAL BACKGROUND (IF JOB RELATED)

A. List last three (3) schools attended, starting with most recent. **B.** List number of years completed. **C.** Indicate degree or diploma earned, if any.

D. Grade Point Average or Class Rank. **E.** Major field(s) of study. **F.** Minor fields of study (*if applicable*).

A. SCHOOL	B. YEARS COMPLETED	C. DEGREE/DIPLOMA	D. GPA/CLASS RANK	E. MAJOR	F. MINOR

REFERENCES

List the name and telephone number of three (3) business/work references who are not related to you and are not previous supervisors. If not applicable, list three (3) school or personal references who are not related to you.

NAME	TELEPHONE	YEARS KNOWN

ADDITIONAL INFORMATION

List professional, trade, business, or civic associations and any offices held. Exclude memberships which would reveal sex, religion, national origin, age, color, disability or any other similarly protected status.

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc. Exclude information which would reveal sex, race, religion, national origin, age, color, disability or other protected status.

List any additional information you would like us to consider.

Please read the following and sign below:

In return for Filer Credit Union's consideration of my application for employment, I agree as follows:

1. I authorize an investigation and verification of my employment, education, criminal conviction and financial record. I authorize my employer and former employers, references, medical facilities, educational institutions and any other persons contacted by the credit union to provide it with all records and information relevant to this employment application without any obligation to give me written notice thereof, and I release all such parties from all liabilities arising from such disclosures. I also waive any claims against the credit union relating to such inquiries and disclosures and release the credit union, its directors, officers, employees and agents from any liability which might arise from such inquires and disclosures.
2. I understand that the credit union will accommodate, to the extent required by law, employees with disabilities to allow access to its facilities and employment opportunities. I also understand that I have 182 days from this date, or the date I know or reasonably know that such accommodation is needed, to file a written request for such accommodation.
3. I agree that this application will be considered for a period of 6 months after this date. I understand and acknowledge that unless I am hired before the end of this period, this application will be null and void and any continuing interest in the credit union will require a new application.
4. If employed, I agree to abide by all rules and regulations of Filer Credit Union.

The information I have provided is true and complete and I understand any false information or material omissions is cause for rejection of this application and termination of employment no matter when discovered.

Signature of Applicant

Date

*If applying online, typed signature will serve as E-Signature.