

Application For Employment

Our Company is an equal opportunity employer. All applicants will be considered regardless of race, color, religion, sex, national origin, age, marital, or veteran status; disability; genetic status, or any other legally protected status. Equal access to the hiring process, services, and employment is available to all persons. Applicants requiring accommodations to the application and/or interview process should contact a representative of the Human Resource Department.

Each question should be answered completely and accurately. **No action will be taken on this application until all questions have been answered and the application has been signed and dated.** Verification of eligibility to work in the U.S. will be required if an employment offer is made.

Employee Information

Name

Last

First

Middle

Address

Street

Apt. #

City

State

Zip Code

Home Phone ()

Cell Phone ()

SSN

Other Names Used

Previous Address Used

Street

City

State

Zip Code

Previous Address Used

Street

City

State

Zip Code

Driver's License Number (if job related)

State

Exp. Date

Position(s) applied for

Have you filed an application here before?

Yes

No

If yes, give date:

Have you been employed here before?

Yes

No

If yes, give date:

Are any of your relatives presently employed with the Company?

Yes

No

If yes, please provide names of relatives, their positions, and departments.

Are you employed now?

Yes

No

Earliest date available for work?

Wage expected?

Are you available to work?

Full time

Part time

Shift work

Temporary

Are you fluent in any foreign language (if job related)? List:

Are you over the age of 18?

Yes

No

Education

	High School	College/University	Graduate/Professional
School Name			
Diploma/Degree			
Honors Received			
Describe Course of Study			

Employment Experience

List all of your work experience including military and voluntary service assignments. **Start with your present or last job.** Attach an additional sheet if necessary.

Employer: _____ Telephone: _____

Address: _____

Job Title: _____ Supervisor: _____

Dates Employed: From _____ To _____

Salary: Starting _____ Final _____

Reason for Leaving: _____

Work Performed: _____

May We Contact This Employer? Yes No If no, why not? _____

Employer: _____ Telephone: _____

Address: _____

Job Title: _____ Supervisor: _____

Dates Employed: From _____ To _____

Salary: Starting _____ Final _____

Reason for Leaving: _____

Work Performed: _____

May We Contact This Employer? Yes No If no, why not? _____

Employer: _____ Telephone: _____
Address: _____
Job Title: _____ Supervisor: _____
Dates Employed: From _____ To _____
Salary: Starting _____ Final _____
Reason for Leaving: _____
Work Performed: _____
May We Contact This Employer? Yes No If no, why not? _____

Employer: _____ Telephone: _____
Address: _____
Job Title: _____ Supervisor: _____
Dates Employed: From _____ To _____
Salary: Starting _____ Final _____
Reason for Leaving: _____
Work Performed: _____
May We Contact This Employer? Yes No If no, why not? _____

Skills/Training

Please summarize your job-related skills or specialized training: _____

List job related professional, trade, business, or civic associations and any offices held. (Exclude memberships that would reveal sex, race, religion, national origin, age, color, disability, or other protected status.)

List job related special accomplishments, publications, and awards. (Exclude memberships that would reveal sex, race, religion, national origin, age, color, disability, or other protected status.)

List any additional information you would like us to consider.

References

Give the name and telephone number of three (3) business/work references who are not related to you. List at least one of your previous supervisors.

<u>Name</u>	<u>Company</u>	<u>Job Title</u>	<u>Work Phone</u>	<u>Other Phone</u>
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<u>Name</u>	<u>Company</u>	<u>Job Title</u>	<u>Work Phone</u>	<u>Other Phone</u>
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<u>Name</u>	<u>Company</u>	<u>Job Title</u>	<u>Work Phone</u>	<u>Other Phone</u>
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Acknowledgments

Accuracy of Information. I certify that the information in this application is correct to the best of my knowledge. I understand that any misrepresentation or omission of any fact in my application, resume, or any other materials, or during interviews is grounds for disqualification from further consideration for employment, or for termination if employed.

Information Release. I authorize the Company to contact any company, institution, or individual it deems appropriate to investigate my employment history, character, qualifications, driving record, and other job-related information. I give my full consent for all contacted persons, including former employers, to provide the information concerning this application. Further, I waive my right to bring a claim against these individuals for any damages arising from furnishing the requested information to the Company. I also release the Company from all liability that might result from checking such references.

Drug Testing. A post-offer drug and/or physical examination may be required. I understand that, as allowed by the Americans with Disabilities Act, any offer of employment may be withdrawn if I test positive for drugs and/or if a condition is discovered which does not permit me to perform the essential functions of the job and for which no reasonable accommodation can be made.

Application Status. I understand that this application is current for only 60 days. At the conclusion of this time, if I have not heard from the Company and still wish to be considered for employment, it will be necessary to fill out a new application.

AT-WILL EMPLOYMENT. I UNDERSTAND THAT IF I AM HIRED, MY EMPLOYMENT AT THE COMPANY IS "AT-WILL" AND MAY BE TERMINATED BY ME OR BY THE COMPANY AT ANY TIME FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. I UNDERSTAND THAT NO EMPLOYMENT OFFER IS BEING MADE BY THE COMPANY AT THIS TIME. I ALSO UNDERSTAND THAT NOTHING IN THIS APPLICATION IS INTENDED TO IMPLY OR CREATE AN EMPLOYMENT CONTRACT AND THAT NO COMPANY REPRESENTATIVE HAS THE AUTHORITY TO MAKE ANY ASSURANCE TO THE CONTRARY.

Signature

Date

Authorization to Past Employer, School, or Other Institution to Release Information

I have applied for employment with **Quest Federal Credit Union** (the Company). As part of the application process, the Company conducts a reference check.

I therefore authorize and request that you furnish relevant, job-related information to the Company and/or its agents in connection with this application.

I release from liability and I agree not to assert any claims or causes of action against all persons, corporations, and organizations supplying this information to the Company and/or its agents. A photocopy of this authorization is as effective as the original.

Name _____ Soc Sec # _____

Dates of Past Employment: From _____ To _____

Past Positions Held: _____

Department/Location: _____

If name has changed (through marriage, etc.) please print former name: _____

Signature

Date