



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 Resources 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. Mail completed application to employment@fortfinancialcu.net.

Employee Information

Name:

| | | |
|--|--|--|
| | | |
|--|--|--|

Last

First

Middle

Address:

| | | | | |
|--|--|--|--|--|
| | | | | |
|--|--|--|--|--|

Street

Apt. #

City

State

Zip Code

Home Phone: (____) _____ Cell Phone: (____) _____ Email Address: _____

Social Security #: _____ Other Names Used: _____

Previous Address: _____

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.

Were you referred by a current Fort Financial employee? Yes No

If yes, please provide the name of the employee.

Are you employed now? Yes No What date would you be 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

Have you been convicted of or plead guilty or no contest to a felony or misdemeanor other than minor traffic violations such as speeding? Yes No

If yes, please complete the following (a conviction record will not necessarily be a bar to employment)

Conviction: _____ Location: _____ Date: _____

Please Explain: _____

Education

| | High School | College/University | Graduate/Professional |
|--------------------------|-------------|--------------------|-----------------------|
| School Name | | | |
| Diploma/Degree | | | |
| Year Graduated | | | |
| 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: _____ Phone: _____

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: _____ Phone: _____

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: _____ Phone: _____

Address: _____

Job Title: _____ Supervisor: _____

Dates Employed: From: _____ To: _____

Salary: Starting: _____ Final: _____

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Work Performed: _____

May we contact this employer? Yes No If no, why not? _____

Employer: _____ Phone: _____

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 information 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.

| Name | Company | Job Title | Work Phone | Other Phone |
|------|---------|-----------|------------|-------------|
| Name | Company | Job Title | Work Phone | Other Phone |
| Name | Company | Job Title | Work Phone | Other Phone |

Acknowledgements

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 Fort Financial Credit Union. 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 the 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. #: _____

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

Signature Date



Request for Information

Last Name: _____ First Name: _____ Middle Name: _____

Maiden Name: _____ Social Security #: _____

Current Address: _____

Street Address City State Zip

Previous Address: _____

Street Address City State Zip

Disclosure for Request of Information

In making this application for employment, I understand that it may be necessary to make investigative inquiries regarding criminal, employment, credit and other history. I understand that inquiries may be made to various federal and state agencies, credit reporting agencies, employers, and personal references, acquaintances and others seeking information as to my personal characteristics, employment status, general reputation, and mode of living.

I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative inquiry that is made.

Please consider this signed statement as my authorization to make any necessary investigative reports.

Applicant: _____

(Print Full Name)

Applicant's Signature: _____ Date: _____