

Last Name

Social Security Number



First Name

Middle Name

## **EMPLOYMENT APPLICATION**

**PERSONAL** 

We are an equal opportunity employer. No question is asked for the purpose of excluding any applicant due to race, creed, color, national origin, age, sex, veteran status, disability, or any other class of individuals protected by law.

Current Mailing Address Street								City			tate	Zip
Permanent Address (if different from above) Street								City		S	tate	Zip
Phone Number Cell Phone Num							mber (if applicable)		Date of B	irth:		
Are you Legally authorized to work in the United States? □ Yes □ No												
					POS	SITIO	N APF	PLYING	FOR			
Hrs.Available	М	T	W	Th	F	S	Su	Are You I	nterested	d In: □Full	□Part □Tempo	orary □Seasonal
From											·	•
То								Have you	ever wo	rked in a fir	nancial institution	before?
Data Assallables	l	Salary Acceptable TOTAL H						□Yes □ No				
Date Available:		•					er Week	If yes, for whom?				
Who Referred You	ı To Th	nis Joh?						From/ to/ Phone Numbe				
Have you ever been convicted for a crime other than a major traffic violation? (This information will be considered in hiring or job placement										or job placement but		
will not automatically disqualify you for employment) □Yes □ No If Yes, Explain:												
Highest Grade Completed Post Secondary Other (Specify) Grade Point Average												
Highest Grade Completed Post Secondary C 1 2 3 4					Out	ner (Specify)			Grade Form Average			
						A	CTIVI	TIES				
Class Organizations, Scholastic Honors, and other school activities (At your option, you may exclude organizations which indicate race, age, sex, creed, color, national origin, religion, or other protected class.)												
Hobbies and Recr	eationa	al Intere	sts									
					EN	IPLO	YMEN	T RECO	RD			
Name & Address of Present Employer								1	Employm	ent Dates		
Cuparijaar'a Nama			Title			I	Phone		From Position	/ /	toto	/ / Final Salary
Supervisor's Name Title			E							Starting Salary	Filial Salary	
Reason for Leaving Ma						May we	lay we contact this employer?					
											Date 🗆 No, do i	not contact
Name & Address of Most Recent Employer (if other than present, if appli							cable) Employment Dates From / / to / /					
Supervisor's Name			Title	Title F			Phone		Position	5	Starting Salary	Final Salary
Reason for Leaving							May we contact this employer?					
							□Yes, Ir	mmediately	☐ Yes,	at a Later I	Date 🗆 No, do i	not contact
OFFICE USE ONL	_Y: <u>  </u>	NTERV	IEW D	ATE A	AND TI	<u>ME:</u> .		1	<u>:</u>	DAT	E HIRED:	<u> </u>

By Signing below, I authorize the store owner to investigate all statements made by me on this application form. I understand that misstatements or omissions of information in connection with my application fore employment can lead to rejection of my applications or dismissal from employment, whenever discovered. I also authorize the store owner to request and receive references from my former employers and I hereby release those employers supplying any information from liability.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the store owner and myself for either employment or the providing of any benefits. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon the store owner unless expressly made in a formal written contract of employment signed by me and an authorized representative of the store owner. If I am hired, I understand that my employment would be "at will," which means that I would have the right to terminate my employment at any time for any reason and that the store owner would have the same right.

I hereby attest that all statements made by me above are true to the best of my knowledge.						
Date	Applicant's Signature					
Date	Manager's Signature					