



EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER
PRE-EMPLOYMENT QUESTIONNAIRE

APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Social Security No.		Desired Salary	\$
Position Applied for			
Are you prevented from lawfully becoming employed in this country because of Visa or immigration status?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are you 18 years or older?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
In case of emergency, Please notify			
Name		Address	Phone Number

EMPLOYMENT DESIRED

Position	Date you can start	
Are you employed now?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, may we contact your present employer? YES <input type="checkbox"/> NO <input type="checkbox"/>
Ever applied to FCCU before?	YES <input type="checkbox"/> NO <input type="checkbox"/>	When?
Ever worked for FCCU before?	YES <input type="checkbox"/> NO <input type="checkbox"/>	When?
Reason for leaving?		
Who referred you to FCCU?	<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Newspaper
	<input type="checkbox"/> Walk In	<input type="checkbox"/> Friend
	<input type="checkbox"/> State Employment Agency	<input type="checkbox"/> College Placement Services
		<input type="checkbox"/> Other

EDUCATION

School Level	Name and Location of School	*No of Years Attended?	Did you Graduate?		Subjects Studied
High School			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
College			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Trade Business or Correspondence School			Yes <input type="checkbox"/>	No <input type="checkbox"/>	

REFERENCES

Please list **three** professional references.

Name	Address	Business	Years Acquainted

PREVIOUS EMPLOYMENT- STARTING WITH MOST CURRENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
Start Date	End Date	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
Start Date	End Date	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
Start Date	End Date	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch of Service		Discharge Date	
Rank at Discharge		Type of Discharge	
Present Membership in National Guard or Reserves		Date Obligation Ends	

GENERAL

Subjects of special study or research work:

Special training:

Special skills:

Special Questions

What foreign languages do you speak fluently?

Read Write

Read Write

Have you been convicted of a felony or misdemeanor within the last 5 years? *

Yes No

Describe:

*You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.

DISCLAIMER AND SIGNATURE

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated.

In consideration of my employment, I agree to conform to the company's rules and regulations and I agree that my employment and compensation can be terminated with or without cause and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed with or without cause and with or without notice, at any time by the company. I understand that no company representative other than its president and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time or to make any agreement contrary to the foregoing.

Signature

Date



CONSENT TO OBTAIN CONSUMER REPORT FOR EMPLOYMENT PURPOSES

I hereby authorize, First Community Credit Union to obtain one or more consumer reports on my behalf for employment purposes.

Applicant/Employee Signature

Date



I hereby authorize First Community Credit Union to verify all information that I have supplied in this application and to conduct any investigation of my previous employment. I further authorize all companies, schools and persons named in my application to give any information requested regarding my employment, character and qualifications. I release and hold harmless First Community Credit Union, as well as said schools, companies or persons from any liability in connection with requesting or providing such information.

Witness	Date	Signed	Date
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The applicant understands and acknowledges that, if hired; his or her employment is at-will and can be terminated with or without notice at any time, for any reason. The applicant also understands and acknowledges that no official of the credit union is authorized to make any verbal assurance or promise of continued employment, and that any such pledge or agreement must be in writing and signed by the President or the President's appointed delegate.