

# APPLICATION FOR EMPLOYMENT



## Members Credit Union

(an Equal Opportunity Employer)

2098 Frontis Plaza Boulevard

P. O. Box 5297

Winston-Salem, NC 27113-5297

(336) 748-4800

We are pleased that you are interested in applying for a position with Members Credit Union. We do not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, or ancestry; or on the basis of age against persons whose age is 18 or older; or on the basis of a handicap not limiting the applicant's ability to perform satisfactorily the job available. No question on this form is intended to secure information to be used for such discrimination. We will give this application every consideration. However, in accepting it, we make no commitment of employment to the applicant.

### PLEASE PRINT

Position Desired \_\_\_\_\_ Date \_\_\_\_\_

Full Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(First, Middle, Last)

Present Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Telephone (\_\_\_\_) \_\_\_\_\_ Other Phone (\_\_\_\_) \_\_\_\_\_ Drivers Lic. No. \_\_\_\_\_

PREVIOUS ADDRESSES	Dates	Address	City	State	Zip

Are you age 18 or over?  Yes  No U. S. Veteran?  Yes  No

List branch of service \_\_\_\_\_ Date entered military \_\_\_\_\_ Date discharged \_\_\_\_\_

Rank at discharge \_\_\_\_\_ List any military training or duties similar to requirements of position applied for \_\_\_\_\_

Have you been previously employed by Members Credit Union?  Yes  No If so, which location? \_\_\_\_\_ Do you have any relatives presently employed at Members Credit Union?

Yes  No If yes, give name and relationship \_\_\_\_\_

Have you previously applied for employment at Members Credit Union?  Yes  No

If yes, when? \_\_\_\_\_ How were you referred to us? \_\_\_\_\_

Do you have the legal right to work in the United States as defined by the Immigration Reform and Control Act?  Yes  No If no, explain. \_\_\_\_\_

**Employment Application - Page 2**

Do you have any commitments to another employer or organization which might affect your employment with us?  Yes  No If yes, explain\_\_\_\_\_

Salary goal \$\_\_\_\_\_ Date available upon offer of employment\_\_\_\_\_

Who should we contact in an emergency? Name\_\_\_\_\_

Relationship\_\_\_\_\_ Phone No.\_\_\_\_\_ Address\_\_\_\_\_

Are you willing to be fingerprinted?  Yes  No To take a physical and drug test?  Yes  No

**EMPLOYMENT HISTORY**

Give complete employment history, beginning with your present employer, or the last employment you held, and go backward for the past seven years (or for last five employers). Note any periods in which you were not employed.

Firm Name		Start Date	End Date	Supervisor's Name		
Address	City	State	Zip	Start Salary	End Salary	
Job Title / Duties		Reason For Leaving				
Firm Name		Start Date	End Date	Supervisor's Name		
Address	City	State	Zip	Start Salary	End Salary	
Job Title / Duties		Reason For Leaving				
Firm Name		Start Date	End Date	Supervisor's Name		
Address	City	State	Zip	Start Salary	End Salary	
Job Title / Duties		Reason For Leaving				
Firm Name		Start Date	End Date	Supervisor's Name		
Address	City	State	Zip	Start Salary	End Salary	
Job Title / Duties		Reason For Leaving				
Firm Name		Start Date	End Date	Supervisor's Name		
Address	City	State	Zip	Start Salary	End Salary	
Job Title / Duties		Reason For Leaving				

**EDUCATIONAL BACKGROUND**

School	Name of School	Address	Last Grade	Type of Course and Degree
Grammar				
High				
College				
Other				

If you attended but did not graduate, why not?\_\_\_\_\_

List any special qualifications which might assist us in placing you to your best advantage\_\_\_\_\_

Do you type?  Yes  No Typing speed\_\_\_\_\_wpm. Do you take shorthand? Yes  No

What business machines can you operate?\_\_\_\_\_

**CHARACTER REFERENCES**

Give the name, address, phone number and basis for knowledge of three persons who have known you during the past five years. **Do not list** relatives by birth or marriage, former employers, or clergymen.

Name	Address	Phone No.	How Known

**CONVICTIONS:** Have you ever been convicted of any crime involving dishonesty, breach of trust, or theft?  Yes  No If yes, please give dates, details, and explanation\_\_\_\_\_

This certifies that this application was completed by me, and that all entries on it, and information in it are true and complete to the best of my knowledge. This is my express permission for Members Credit Union to conduct a personal investigation as to my qualifications, experience, background, etc. It may contact any person or firms it so desires, and such persons or firms are requested to furnish whatever information they may have which would be relevant to the investigation. I understand that any misrepresentation or the omission of any material facts would be good and sufficient cause for my discharge at any time during my employment. Furthermore, I understand that just as I am free to resign at any time the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

Applicant's Signature\_\_\_\_\_ Date\_\_\_\_\_

**PAST EMPLOYMENT RELEASE**

Having made application for employment at Members Credit Union, I request their representative be informed as to my previous employment record. I hereby authorize the investigation of my past record of any and all information which may concern my past employment, whether same is of record or not. I release my employers and all persons whomsoever of any damages resulting from furnishing said information.

Applicant's Signature\_\_\_\_\_ Date\_\_\_\_\_

**FAIR CREDIT REPORTING ACT - PRE-NOTIFICATION**

This is to inform you that as part of our procedure for processing your application, an investigative report may be made whereby information is obtained through a personal interview with you and/or with third parties, such as family members, business associates, financial sources, friends, neighbors, or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, and mode of living, whichever may be applicable. If you are rejected for employment and the basis for your rejection was information received from a commercial reporting agency, we will furnish you with the name and address of that agency.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**IMMIGRATION REFORM AND CONTROL ACT OF 1986**

All individuals hired by this credit union on or after November 7, 1986, are required by law to supply the information and documentation necessary to complete INS Form I-9. Such information will be used to verify the individual's identity and eligibility for employment in the United States. It is the express intention of this credit union to hire only those applicants who are legally eligible for employment in the United States. This credit union does not discriminate against any job applicant on the basis of national origin or citizenship status in the case of a citizen or intending citizen. Authority to collect information on INS Form I-9 is contained in Title 8, United States Code, Section 1324A.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**APPLICATION WILL REMAIN ACTIVE FOR 90 DAYS**

This application will remain active for 90 days. If you are still interested in employment with Members Credit Union after that time, you will be required to fill out another application.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR CREDIT UNION USE ONLY**

Interviewed By \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Interviewer's Remarks \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

References Checked By \_\_\_\_\_ Date \_\_\_\_\_

Physical Appointment Set For \_\_\_\_\_ Date \_\_\_\_\_

Hiring Decision \_\_\_\_\_

\_\_\_\_\_

Other Information \_\_\_\_\_