

Application for Employment

at the

Bank of Alma

An Equal Opportunity Employer

THIS APPLICATION WILL BE HELD IN THE ACTIVE FILE FOR 6 MONTHS.
IF YOU WISH TO BE CONSIDERED AFTER THAT DATE, PLEASE RECONTACT US.

PERSONAL

NAME _____ CELL/HOME PHONE NUMBER _____

PRESENT ADDRESS _____

SOCIAL SECURITY NUMBER _____ - _____ - _____ EMAIL ADDRESS _____

ARE YOU ELIGIBLE FOR EMPLOYMENT IN THE USA? _____ (IF YOU ARE HIRED, FEDERAL LAW REQUIRES THAT YOU PROVIDE DOCUMENTATION OF YOUR IDENTITY AND ELIGIBILITY FOR EMPLOYMENT AND THAT YOU ATTEST TO YOUR ELIGIBILITY FOR EMPLOYMENT.)

IF YOU ARE UNDER THE AGE OF 18, STATE: YOUR AGE _____, AND WHETHER YOU CAN PROVIDE A WORK PERMIT. _____

POSITION(S) APPLIED FOR _____ RATE OF PAY EXPECTED \$ _____

WOULD YOU WORK FULL TIME? _____ PART TIME? _____

IF YOUR APPLICATION IS CONSIDERED FAVORABLY,
ON WHAT DATE WILL YOU BE AVAILABLE FOR WORK? _____ / _____ / _____.

THE BANK OF ALMA IS AN EQUAL OPPORTUNITY EMPLOYER. THE BANK OF ALMA DOES NOT DISCRIMINATE IN HIRING OR EMPLOYMENT ON THE BASIS OF RACE, COLOR, CREED, NATIONAL ORIGIN, MARITAL STATUS, SEX, SEXUAL ORIENTATION, ANCESTRY, AGE, AGAINST QUALIFIED HANDICAPPED PERSONS, QUALIFIED DISABLED VETERANS OR VETERANS OF THE VIETNAM ERA, OR ON THE BASIS OF ARREST OR CONVICTION RECORD EXCEPT WHERE THE CIRCUMSTANCES MAKE THE APPLICANT UNACCEPTABLE TO A SURETY COMPANY OR THE CIRCUMSTANCES OF THE OFFENSE ARE SUBSTANTIALLY RELATED TO THE CIRCUMSTANCES OF THE PARTICULAR POSITION. IT IS THE BANK OF ALMA'S POLICY TO COMPLY WITH ALL LAWS PROHIBITING DISCRIMINATION. THIS APPLICATION WILL BE GIVEN EVERY CONSIDERATION, BUT ITS RECEIPT DOES NOT IMPLY THAT THE APPLICANT WILL BE EMPLOYED. ONE OF THE FACTORS IN DETERMINING WHETHER AN APPLICANT WILL BE EMPLOYED IS THAT THE BANK OF ALMA, AT ITS OWN EXPENSE, ARRANGES FOR A SURETY BOND FOR ITS EMPLOYEES WHO ARE REQUIRED BY LAW TO BE BONDED. UNLESS THE APPLICANT'S BACKGROUND IS ACCEPTABLE TO A SURETY COMPANY, THE BANK OF ALMA MAY BE UNABLE TO OFFER EMPLOYMENT.

EDUCATION

SCHOOL	NAME OF SCHOOL	COURSE OF STUDY	DEGREE
HIGH		GENERAL	
COLLEGE			
OTHER			

GENERAL INFORMATION

HAVE YOU BEEN EMPLOYED HERE PREVIOUSLY? _____
 HAVE YOU EVER APPLIED HERE BEFORE? _____

[illegible]

NAME	OCCUPATION	EMAIL ADDRESS	YEARS KNOWN

DATES		NAME & ADDRESS OF EMPLOYER	DESCRIBE THE WORK YOU DID	SALARY	EXACT REASON FOR LEAVING
From:				From:	
To:	Email Address: Phone Number:	Supervisor:		To:	May we contact them?
From:				From:	
To:	Email Address: Phone Number:	Supervisor:		To:	May we contact them?
From:				From:	
To:	Email Address: Phone Number:	Supervisor:		To:	May we contact them?
From:				From:	
To:	Email Address: Phone Number:	Supervisor:		To:	May we contact them?
From:				From:	
To:	Email Address: Phone Number:	Supervisor:		To:	May we contact them?

AGREEMENT

*PLEASE READ BEFORE SIGNING.
IF YOU HAVE ANY QUESTIONS REGARDING THIS AGREEMENT,
PLEASE ASK THEM OF A PERSONEL OFFICER BEFORE SIGNING.*

IN ORDER THAT THE BANK OF ALMA MAY ARRIVE AT AN EMPLOYMENT DECISION, I UNDERSTAND THAT THE BANK OF ALMA MAY DO ANY OR ALL OF THE FOLLOWING, AND I HEREBY CONSENT TO THE SAME:

- ☐ Investigate all statements contained in this application for employment.
- ☐ Request that an investigative consumer report be prepared. I understand that the report may include information as to my character, general reputation, personal characteristics, and mode of living. I have a right to request that the Bank of Alma completely and accurately disclose to me the nature and scope of the Investigation requested. My request must be in writing to the Bank of Alma and be made within a reasonable time after I complete this application.
- ☐ Request that a report of my credit record be prepared if such information is substantially related to the position for which I am applying.
- ☐ Request that I be finger printed.
- ☐ As a precondition to employment and, if employed, as a condition of continued employment, I agree to submit to drug and alcohol screening tests from time to time, if requested to do so by the Bank of Alma. I understand that the failure to cooperate with the testing will be grounds for dismissal.
- ☐ I understand that any offer of employment may be conditioned upon the results of a medical examination conducted prior to my starting work. I agree to a physical examination by a doctor selected by the Bank of Alma and to complete a health evaluation form and provide any related documentation, if requested to do so by the Bank of Alma.

IN THE EVENT THAT I AM EMPLOYED BY THE BANK OF ALMA:

- ☐ I will comply with all the rules and regulations of the Bank of Alma, including a request for a current personal photograph meeting the Bank of Alma's specifications.
- ☐ I understand that my employment can be terminated at any time, with or without cause, either at my option or that of the Bank of Alma.
- ☐ I understand that no personnel recruiter, interviewer or other representative of the Bank of Alma other than the President has any authority to enter into any agreement for employment for any specific period of time.
- ☐ I understand that any employment manuals or handbooks that may be distributed to me during the course of my employment shall not be construed as an employment contract.
- ☐ I certify that the answers and information given in this employment application are true and correct to the best of my knowledge. If I am hired, I understand that false or misleading information given in my application or interview is grounds for discharge from employment.

SIGNATURE

DATE