

# APPLICATION FOR EMPLOYMENT



Thank you for your interest in employment with Advance Financial Federal Credit Union. When completing your application make sure to read each question carefully and provide thorough answers to every question. Be sure to include your reasons for leaving previous employers and check your spelling and grammar carefully before saving the application. Lastly, make sure the application is filled out completely. Please mark N/A to any questions that are not applicable as incomplete applications **WILL NOT** be considered for employment.

Position applied for: \_\_\_\_\_

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Address: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Best phone to reach me at: Cell Home

Email Address: \_\_\_\_\_ Desired Location(s): East Chicago, IN Schererville, IN

Type of Employment Desired: Full-Time Part-Time Seasonal Salary Expectations: \_\_\_\_\_ Per: Hour Year

How much banking/credit union experience do you have? None Less than 1 year 1-3 years 3-5 years 5 or more

How were you referred to our Company? If recommended by an employee of Advance Financial, please give that employee's name: \_\_\_\_\_

Have you submitted an application with us before? Yes No If yes, please give date of application and position(s) applied for: \_\_\_\_\_

Have you ever been employed with Advance Financial? Yes No If yes, please give dates of employment and reason for leaving: \_\_\_\_\_

Please provide the name(s) of anyone you know who is employed by Advance Financial: \_\_\_\_\_

Are you 18 years or older? Yes No

Are you legally eligible for employment in the United States? (If yes, proof is required if hired.) Yes No

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodations)? Yes No Need more information about the job's essential functions to respond.

Are you available to work on Saturdays? Yes No Will you work overtime if required? Yes No

Have you ever been bonded? Yes No Where were you employed at that time? \_\_\_\_\_

Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our Company? Yes No If yes, please explain: \_\_\_\_\_

NOTE: Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of, a crime? Yes No  
If yes, please provide date(s) and details: \_\_\_\_\_

## EMPLOYMENT EXPERIENCE

Start with your present or last place of employment.

**Employer #1** \_\_\_\_\_

Employer Contact Name \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Your Job Title \_\_\_\_\_ Your Supervisor \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_  Hour  Year  
Final Pay: \_\_\_\_\_  Hour  Year

Work Performed \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact for reference?  Yes  No

If no, why not? \_\_\_\_\_

**Employer #2** \_\_\_\_\_

Employer Contact Name \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Your Job Title \_\_\_\_\_ Your Supervisor \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_  Hour  Year  
Final Pay: \_\_\_\_\_  Hour  Year

Work Performed \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact for reference?  Yes  No

If no, why not? \_\_\_\_\_

**Employer #3** \_\_\_\_\_

Employer Contact Name \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Your Job Title \_\_\_\_\_ Your Supervisor \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_  Hour  Year  
Final Pay: \_\_\_\_\_  Hour  Year

Work Performed \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact for reference?  Yes  No

If no, why not? \_\_\_\_\_

**Employer #4** \_\_\_\_\_

Employer Contact Name \_\_\_\_\_

Address \_\_\_\_\_ Phone: \_\_\_\_\_  
STREET CITY STATE ZIP CODE

Your Job Title \_\_\_\_\_ Your Supervisor \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_  Hour  Year  
Final Pay: \_\_\_\_\_  Hour  Year

Work Performed \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact for reference?  Yes  No

If no, why not? \_\_\_\_\_

### EMPLOYMENT INFORMATION

Explain any gaps in your employment.

Have you ever been fired or asked to resign from a job?  Yes  No

If yes, please explain:

### EDUCATION BACKGROUND

**High School:** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Did you graduate?  Yes  No Diploma or GED? \_\_\_\_\_

**College or University:** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Did you graduate?  Yes  No Degree(s) \_\_\_\_\_

**College or University:** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Did you graduate?  Yes  No Degree(s) \_\_\_\_\_

**Graduate School:** \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Did you graduate?  Yes  No Degree(s) \_\_\_\_\_

**Continuing Education:**

## SPECIAL TRAINING OR SKILLS

Summarize any special training, skills, licenses or certificates that may assist you in performing the position for which you are applying.

List your NMLS ID (If applicable) \_\_\_\_\_

## QUESTIONS

Why do you want to work for Advance Financial?

What makes you the perfect candidate for the position you are applying for?

Describe the best job you ever had and why you liked it so much.

Why should we choose you over other qualified candidates?

## REFERENCES

List three business/work references who are **not** related to you and are **not** previous supervisors. If not applicable, list three school or personal references who are **not** related to you.

Name	Title	Relationship to You	Telephone	Years Known

**PLEASE READ CAREFULLY:**

**EQUAL EMPLOYMENT OPPORTUNITY**

I understand that Advance Financial Federal Credit Union (AFFCU) does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

It is the policy of AFFCU to provide equal employment opportunity to all qualified persons and to administer all aspects and conditions of hiring without discriminating on the basis of race, color, religion, sex, national origin, disability, pregnancy, age, genetic information, marital status, sexual orientation, or any other classification protected by federal, state or local law. AFFCU provides equal employment opportunities on the basis of individual merit, qualifications, and performance.

AFFCU supports, and complies with, the Americans with Disabilities Act. Job applicants, candidates, and employees, including those with disabilities, will be evaluated on the basis of their abilities to perform the essential duties of the job. Reasonable accommodations will be provided for qualified individuals, provided the accommodation does not cause undue hardship to the Credit Union.

**AUTHORIZATION TO RELEASE RECORDS**

I understand that a thorough background check will be conducted to verify the accuracy of the information submitted, including a credit check to verify my credit history. I expressly authorize, without reservation, AFFCU, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, cover letter, resume or job interview. I hereby release from liability and waive any and all rights and claims I may have regarding AFFCU, its agents, employees or representatives for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

**APPLICANT STATEMENT**

I understand that I have submitted all of the information on this application myself and all information is true, complete and correct to the best of my knowledge. I understand that any information provided by me that is found to be false, misleading, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment or may result in my immediate discharge from the employer's service, whenever it is discovered.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

Type your full legal name to certify that you have read, fully understand and accept all terms of the above statements.

**Applicant's Name** \_\_\_\_\_ **Date** \_\_\_\_\_

Before you click the "SAVE APPLICATION" button below, please carefully review your entire application as incomplete applications will not be considered for employment.