Chessie Federal Credit Union

Employment Application

An Equal Opportunity Employer

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, or marital status, or the presence of a non-related medical condition or disability. All questions must be answered and application signed. Any application that provides unrequested information will be automatically rejected.

Position(s) Applied	d for	Date of Ap	oplication	/	/	
Referral Source:	Advertisement Employee Government Employment Agency Internet Other		elative			
Name:		Social Secu	rity Number: _			
Cumant Adduses		City:	State	:	Zip:	
How long at this add	dress?					
		- City:	State	e:	Zip:	_
- How long at this add					-	
•		best time to	call you at hom	ne:		
What date are you avail	lable for employment?	Date	ə:			
Type of employment de	esired: (check all that apply)	Full time	Part time	Temporar	ry	Seasonal
Are you able to work ov	•		Yes	No		
	ne attendance requirements of the position?	<u></u>	Yes	No	Mhone	
Have you previously ap	oplied for a position at Chessie FCU?		Yes Yes	No No	When?	
Have you ever been bo		If yes, with wha		Nu	VVIICII.	
Are you eligible to work		II you,	Yes	No		
Are you presently on la If yes, please explain:	ayoff and/or subject to recall from any other	company?	Yes	No		
_	onvicted of or pleaded guilty to a felony in the (give date, location, charge, etc.)	ne past seven y	/ears? Yes	No		
	(Conviction will not necessarily d	disqualify you fo	r employment)			
	ou have a valid driver's license?	, , , , , , , , , , , , , , , , , , ,	Yes	No		
DL#	Туре:		Stat	te of Issue		
Have you had any movi If yes, please describe	ing violations in the past 3 Years?					
If ves. please list:	ves currently employed by Chessie FCU?		Yes	No		
If you are under 18, car	n you furnish a work permit?		Yes	No		
Person to be cor	ntacted in case of an emergency:	Relationship	p:			
Name:		Telephone #	#:			
Address:		City:	State:		Zip:	

Educational Background:

Employment History:

Address:

Job Title:

Immediate Supervisor and Title:

Reason for leaving:

Type of School	Name/City	How Many Years Attended	Graduated	Course or Major
High School		1 2 3 4	Yes No	
College			Yes No	
Post Graduate			Yes No	
Business or Trade			Yes No	
Other				

List your last three (3) er Explain any gaps in emp	nployers, assignments or vol lloyment in comments sectior	unteer ac below.	ctivities,	starting	g with the	most recent, including military experience.
Employer:	Telephone:		Dates Employed Month & Year		Summarize the nature of the work performed and job responsibilities	
	·			From	To	
Address:						
Job Title:					Rate/Salary arting	
Immediate Supervisor ar	nd Title:			\$	Per	
Reason for leaving:					Rate/Salary Final	
May we contact for reference	ce / verification? Yes	No L	₋ater	\$	Per	
Employer:	Telephone:				Employed h & Year To	Summarize the nature of the work performed and job responsibilities
Address:						
Job Title:					Rate/Salary arting	
Immediate Supervisor ar	nd Title:			\$	Per	
Reason for leaving:					Rate/Salary arting	
May we contact for refer	ence / verification? Yes	No L	₋ater	\$	Per	
				Dates		

May we contact for reference / verification? Comments and other skills and qualifications (including explanation of any gaps in employment):

No

Later

Yes

\$

Hourly Rate/Salary Starting

Hourly Rate/Salary Starting

References:

List name and telephone number of 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, whom have knowledge of your work ethic, experience and abilities.

Name	Telephone	Years known	Relationship	

I certify that the facts contained in this application are true and complete. Any misrepresentation or falsification of information or significant omissions will be cause for rejection of my application or for subsequent discipline up to and including my dismissal from employment if discovered at a later date.

I understand that, if employed, my employment is not guaranteed for any term, and my employment may be terminated by the employer or myself at any time and for any reason with or without prior notice. No representative of Chessie FCU other the owner(s) is authorized to make any assurance or promise of continued employment and any such assurance must be in writing signed by the owner(s).

If I am employed, I agree to comply with and be bound by the safety and health rules and regulations, and rules of conduct of Chessie FCU.

This application will remain on active file for 60 days. If I am hired within this period, this form will be transferred to my individual personnel file. If I am not hired or have not heard from this employer within 60 days, this application is no longer active and I will need to reapply for employment if I wish to be considered for a job with Chessie FCU.

I give the employer and/or it's agents, including consumer reporting bureaus, the right to investigate any and all statements made in this application for the purpose of employment and retention of employment. This investigation may include, but not limited to, credit reports, criminal conviction records, motor vehicle driving records and previous employment history. Further, I hereby release from liability and hold harmless this employer, its' representatives, all persons and organizations/companies for furnishing such information.

If required, I agree to a drug testing prior and during employment or for post accident occurrences.

The employer, Chessie FCU, is an Equal Opportunity Employer. The employer does not discriminate in employment and no questions on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

NOTICE: This is to inform you that as part of processing your employment application, we may obtain a consumer report and/or an investigative report which includes information as to your character, general reputation, personal characteristics and mode of living. If an investigative report is requested, you have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation. Be signing below, you acknowledge receipt of a copy of this notice and a copy of the "Summary of Your Rights Under the Fair Credit Reporting Act."

Signature of Applicant	
Date	