

Application for Employment



We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For		Date of Application		
How did you learn about us?				
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In		
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____		
Last Name		First Name		Middle Name
Address Number	Street	City	State	Zip Code
Telephone Number(s)			Social Security Number	

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

Have you ever been employed with us before? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
Proof of citizenship or immigration status will be required upon employment. Yes No

On what date would you be available for work _____

Are you available to work: Full Time Part Time Shift Work Temporary

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years?
Bonding and fingerprinting required will be required upon employment. Yes No

If yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Name and Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				
Graduate Professional				
Other (specify)				

Describe any specialized training, apprenticeship, skills, languages you can speak and/or extra-curricular activities:

Specialized Skills

Check skills/Equipment Operated

- | | | |
|-------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Computer | <input type="checkbox"/> Word | <input type="checkbox"/> Power Point |
| <input type="checkbox"/> Calculator | <input type="checkbox"/> Excel | <input type="checkbox"/> Publisher |
| <input type="checkbox"/> Access | <input type="checkbox"/> Internet Explorer | |

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experiences.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number (s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				
2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number (s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				
3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number (s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				
4.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number (s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Additional Information

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without accommodations, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such job or occupation is attached. YES NO

References

Name	Phone #	Relationship to:
Address		
Name	Phone #	Relationship to:
Address		
Name	Phone #	Relationship to:
Address		

I certify that answers given herein are true to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also that I am required to abide by all rules and regulations of the employer.

I hereby authorize Exchange State Bank to pull an employment credit history.

Signature of Applicant

Date

ADDENDUM TO APPLICATION FOR EMPLOYMENT

What rate of pay do you expect to receive if employed by the Exchange State Bank.
\$ _____ per hour/week/year (circle ONE)

PLEASE READ BEFORE SIGNING:

I recognize that in making this application for employment that if I am employed by the Exchange State Bank, my employment will be at will, which means my employment can be terminated at any time with or without cause. I further recognize that if I am employed by the Exchange State Bank, I will be subject to certain policies, rules and regulations which may or may not be set forth in writing. I further recognize that no written or oral statements by the Bank or any of its employees or agents shall form the basis for a contract of employment. I further recognize that only the Board of Directors of the Bank shall have the authority to enter into a contract of employment with me and that any such contract, if offered, will be in writing, expressly identified as such and signed by myself and the Chairman of the Board or President of the Bank.

Date

Signature of Applicant

EXCHANGE STATE BANK
DISCLOSURE AND AUTHORIZATION

Disclosure

I understand that **Exchange State Bank** may obtain and review information contained in consumer reports or investigative consumer reports, including my criminal history, to evaluate my qualification for employment and, if I am hired, for other employment purposes, including promotion or continued employment.

Authorization

I authorize Exchange State Bank to obtain consumer reports or investigative consumer reports about me, including my criminal history, for use in considering my application for employment and, if I am hired, for other employment purposes, including promotion or continued employment.

Date

Signature