

Application for Employment

Applicant's Name: _____

Date: _____

Personal Information

Position (s) for which you are applying: _____

Last Name: _____ First Name: _____ Middle : _____

Address: _____

City: _____ County: _____ State: _____ Zip code: _____

Home/daytime Number: _____ Alternative Telephone: _____

Social Security No.: _____ Email: _____

Driver's License Number: _____ Issuing State: _____

Can you legally work in the USA? (Y/N) _____

Have you ever been convicted or plead guilty to a felony or any drug-related offense? (Y/N) _____

Were you ever discharged by any company? (Y/N) _____

If yes, give name (s) of company(ies) and reasons: _____

Name and telephone of person to notify in event of an emergency _____

Education, Skills, and Licenses

Name/City/State	Course of Study	Graduate? (Y/N)	Degree/Diploma Type
High School			
College			
Graduate School			
Business/Trade			
Other			

Professional Licenses or Certifications

Type :	Number:
State (s):	Expiration date (s):
Type:	Number:
State (s):	Expiration date (s):

Employment Interest

Date Available to start work: _____ Salary Requirements: _____

What type of positions would you like? Full Time _____ Part Time _____ Temporary _____

What type of shift would you like? Early Morning _____ Regular _____ Evenings _____

Can you work Evenings? _____

List software programs you are proficient in: _____

Work History

Date, Month, and Year	Employer's Name/Address Supervisor/Phone	Job Title and Duties	Salary	Reason for leaving
From:	Name: _____ Address: _____ _____	Job Title: _____ Duties: _____ _____	Start	
To:	Supervisor: _____ Phone: _____	_____	End:	Eligible for rehire
From:	Name: _____ Address: _____ _____	Job Title: _____ Duties: _____ _____	Start	
To:	Supervisor: _____ Phone: _____	_____	End:	Eligible for rehire

Personal References

List people who are qualified to evaluate your capabilities . (Do not include relatives)	Telephone	Occupation	Years Known

Please read the following information and authorizations for formal release of information carefully before signing this application.

I hereby certify that I have carefully reviewed and approved the foregoing information supplied by me and that this information is true and correct to the best of my knowledge and give Bluegrass Community Federal Credit Union the right to investigate all information and to secure additional information if necessary in accordance with the Privacy Act, the Freedom of Information Act, and the Fair Credit Reporting Act. I expressly authorize Bluegrass Community FCU or Personnel Screening Services, Inc. to provide a copy of this application to any persons associated with any Educational Institution, past or present Employer, Law Enforcement Agency or Court, the Department of Motor Vehicles, all necessary Government and Private Agencies and all Credit Reporting Agencies and fore these entities to prove responsive information regarding my background to Bluegrass Community FCU and Personal Screening Services, Inc. for the purpose of being considered for employment by Bluegrass Community FCU. I hereby release Bluegrass Community FCU, Personnel Screening Services, Inc. and ALL Persons from liability as a result of furnishing the foregoing information. I also authorize that a copy of this release be as valid as the original.

I understand that this employment application and any other Bluegrass Community FCU documents are not contracts of employment and that, if I am hired, I may voluntarily leave employment at any time for any reason and, likewise, Bluegrass Community FCU, may terminate my employment at any time for any reason after my 90 day period. Any representations to the contrary by Bluegrass Community FCU representative should not be relied upon or be construed as Bluegrass Community FCU policy.

If I am offered a position and I accept employment with Bluegrass Community FCU, I agree to abide by all the rules and regulations which are in effect or may be established in the future. I agree to work any shift necessary for adequate member service. And agree to work overtime hours if called upon. I agree to be available for and will participate in cross-training, I also agree to attend training programs offered and required by bluegrass Community FCU. I understand that as a team member, I am responsible for customer service and satisfaction with that service and care in my work performance. I understand, that falsification of any information on this or any other Bluegrass Community FCU related form may result in withdrawal of the job offer or discharge after employment. I authorize Bluegrass Community FCU to make a thorough investigation of my past employment (s), school records, and all other facts or references stated above, and release from all liability or responsibility all persons, places of business, educations institutions, and municipalities supply such information.

Signature: _____ Date: _____

