



JOB APPLICATION
An Equal Opportunity Employer

All applicants are considered for employment without regard to race, color, national origin, religion, sex, age, marital or veteran status, or disability. No question on this form is intended to secure information to be used for such discrimination.

PLEASE PRINT OR TYPE

Name: _____ Date: _____

Street Address: _____

City, State, and Zip: _____

Telephone Number: Business: _____ Home: _____

Social Security Number: _____ Email: _____

Are you under age 18? _____ Yes _____ No

Have you ever worked here before? _____ Yes (dates) _____

_____ No

Have you ever applied here before? _____ Yes (dates) _____

_____ No

REFERRAL/RELATIVES

List all relatives and acquaintances that work for West End Bank. (Note: The employment of a relative or acquaintance is not a qualification for employment and will not result in preference in employment.)

How did you learn of employment opportunity at West End Bank?

_____ Walk-in _____ Relative/Friend _____ Agency _____ Other
_____ School _____ Current Employee _____ Advertisement

JOB AND AVAILABILITY

Position(s) applying for: _____ Location: _____

Minimum weekly or hourly salary required: _____

Date available for work: _____

Are you available to work: _____ Full-Time _____ Part-Time _____ Temporary

Hours, days of the week, not available to work _____

CRIMINAL RECORD

(Note: A guilty plea to or conviction of a crime, or a pending charge, is not an automatic bar to employment; all circumstances will be considered.)

Have you ever pled guilty to, or been convicted of, a crime? _____ Yes _____ No

If so, state the nature of the crime(s): _____

Date of plea(s) or conviction(s): _____

Name and location of the court(s): _____

Do you have any criminal charges pending against you? _____ Yes _____ No

If so, state the nature of the crime(s) you are alleged to have committed:

Name and location of court(s) where pending: _____

MILITARY SERVICE

If you served in the Armed Forces or some equivalent, describe your duties and any special training:

Branch of Service: _____ Period of active duty: _____ From _____ To _____

Rank at date of discharge: _____

Type of discharge (Note: dishonorable discharge is not an automatic bar to employment; all circumstances will be considered.) _____

If dishonorable, explain circumstances: _____

EDUCATION AND TRAINING

School	Name City/State	Type of Course or Major	Did you Graduate?	Degree or Diploma
High School				
College				
Graduate School				
Trade, Business, Correspondence or Other				

If you did not graduate, why did you leave school or college? _____

Are you planning to pursue further studies? _____ Yes _____ No

If so, when, where and what courses? _____

EMPLOYMENT HISTORY

(List present or most recent employer first and continue in reverse chronological order, including self-employment. If you need additional space, please continue on a separate piece of paper.)

(1.) Company:	Address:	Telephone:
Date Employed: From To	Starting Salary: Leaving Salary:	Supervisor:
Duties:		
Reason for Leaving:		

If you are presently employed, why do you want to change jobs? _____

(If you are currently employed and do not want us to contact this employer at this time, circle the name of the employer.)

(2.) Company:	Address:	Telephone:
Date Employed: From To	Starting Salary: Leaving Salary:	Supervisor:
Duties:		
Reason for Leaving:		

(3.) Company:	Address:	Telephone:
Date Employed: From To	Starting Salary: Leaving Salary:	Supervisor:
Duties:		
Reason for Leaving:		

(4.) Company:	Address:	Telephone:
Date Employed: From To	Starting Salary: Leaving Salary:	Supervisor:
Duties:		
Reason for Leaving:		

SPECIAL SKILLS AND QUALIFICATIONS

(Note: You may exclude any information that would reveal race, color, religion, sex, national origin, age or disability.)

List professional, trade, business, or civic activities and offices held: _____

Provide any further information that does not appear elsewhere in this application that you think would be helpful to us in considering you for employment, such as special skills, experience, education, training, research, accomplishments, articles published, or other activities. _____

REFERENCES

List three persons other than relatives or former employers who can be contacted concerning your skills, abilities and knowledge as it pertains to the position you have applied for.

	<u>Name</u>	<u>Employment</u>	<u>Address</u>	<u>Telephone No.</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

TERMS AND CONDITIONS OF APPLICATION FOR EMPLOYMENT

I hereby certify that the information provided on this application is true and complete, and I understand and agree that false statements, misrepresentations, or significant omissions in this application or during any subsequent interview form proper grounds for not hiring me or for terminating my employment if discovered at a later date.

I hereby authorize West End Bank to investigate fully all information contained in this employment application and to investigate and compile any other information that may bear upon my suitability for employment. I further authorize my past and present employers to furnish West End Bank with my complete records of employment together with the reasons for my separation and any and all information that such employers may possess concerning me, and I release past and present employers and their officials, officers and agents from any and all liability or any damages that may accrue to me by reason of furnishing such information and I similarly release West End Bank from liability or damages for compiling such information.

I understand and agree that if I am employed, the employment relationship will be terminable at will by either party without notice or cause, notwithstanding any other oral or written statements by either party prior to, at, or following date of employment unless set out in writing, dated, and executed by both parties or their designated legal agents. Only the President or Vice President of Human Resources has such authority on behalf of West End Bank.

I understand that prior to employment, or from time to time during the course of my employment, I may be required, to the extent permitted by law and any applicable contract, to take a drug or alcohol screen, or similar test or examination, as a condition of hiring or continued employment.

I understand that this application will be considered active for a period of six months only, and that I will not be considered for employment after six months from the date of this application unless I complete a new application at that time.

Signed: _____

Dated: _____