

EMPLOYMENT APPLICATION For COMMUNITY 1ST CREDIT UNION

(PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE)

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT but is merely intended to evaluate suitability for employment. It is the Company's policy to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, sexual orientation, disability, veteran status, or any other status protected under state and federal law. Please let us know if you need any special accommodation[s] to participate in the application process.

Once the Company has offered you a conditional offer of employment, you may – depending on your job duties - be subject to successful completion of a drug and/or alcohol test and background and/or credit check. You must also have (a) a valid driver's license and insurance as required by law; (b) an acceptable driving record; and (c) reliable transportation to and from work.

PERSONAL INFORMATION

Name	Last	First	Middle	Social Security # (volun	tary)
Home Phone		Work	k Phone		
Please list	below your curre	ent address and	your addresse	s for the last TEN years:	
Current:	Street	City	State	Zip Si	nce (Mo/Yr.)
Street	City	State	Zip	Move-out date	Move-in date
Street	City	State	Zip	Move-out date	Move-in date
Street	City	State	Zip	Move-out date	Move-in date
EMERGEN	ICY CONTACT	NAME		EMERGENCY PHO	NE



EDUCATION RECORD

High School Attended	City, County & State		Did you earn a Diploma: Y/N
Undergraduate College Attended	City, State	Areas of Study	Degree/Certificate/Diploma:
Undergraduate College Attended	City, State	Areas of Study	Degree/Certificate/Diploma

EMPLOYMENT INFORMATION

Position Applied For:	Date You Can St	art Work:	Desired Salary	/:
			\$	
Do you Prefer: Full-Time Pa	rt-Time	Can You Work:	Weekends	Evenings
Please answer all of the following	questions. When	n necessary, note	question numb	per and use an
extra piece of paper to provide ex			-	
1) Are you at least 18 years of age	and legally eligib	le for work in the	United States)
, ,		YES □	NO □	
2) Will you work overtime when i	necessary?	YES □	NO □	
3) Have you received a job descri	ption or aware of	the essential fun	ctions of the jo	b you are
applying for:	•	YES □	NO 🗆	
4) Do you understand the job rec	quirements?	YES 🗆	NO □	
(If no, please explain)	•			
5) Are you currently bound by a r	non-competition,	non-solicitation,	confidentiality of	or trade secret
agreement?	YES	□ NO □		
(If yes, please explain)				
6) Have you ever been discharge	d or asked to resi	gn from a job? YE	S □ NO I	
(If yes, please explain)	·	,		
7) Have you ever been warned, d	isciplined, or disc	harged for sexua	l harassment, fi	ghting, assault, or
related offenses?	YES	□ NO □		
(If yes, please explain)				
8) Have you been convicted of an	y criminal offense	by this state or a	any other jurisd	iction in the last
10 years? Conviction will not necessarily disqualify an applicant from employment. YES 🗆 NO 🗆				
(If yes, please explain)				
NOTE: Answering "Yes" to this question is not an automatic bar to employment. Factors to be				
considered include the nature and gravity of the offense or conduct, the time that has passed since				
the offense or conduct and/or completion of the sentence, and the nature of the job held or sought.				
9) Do you have any friends or relatives who work here? YES \(\sigma\) NO \(\sigma\)				
If so, who?				
11 50, WIIO.				



EMPLOYMENT HISTORY

Are you currently employed? YES □ NO □					
May we contact your current employer? YES	May we contact your current employer? YES \square NO \square				
Please list below your last three employers beg	inning with the most recent:				
	illilling with the most recent.				
Most Recent Employer					
City	State	Zip Code			
Supervisor	Phone	Dates From/To			
Supervisor	Thone	Dates Frompro			
Position Held	Pay Rate Upon Leaving				
	\$				
Reason For Leaving:					
8					
Duties:					
Duties:					
Next Most Recent Employer					
C:t	Ctata	7:n Codo			
City	State	Zip Code			
Supervisor	Phone	Dates From/To			
Position Held	Pay Rate Upon Leaving				
1 Osition field					
	\$				
Reason For Leaving:					
Duties:					
Next Most Recent Employer					
City	State	Zip Code			
,					
Cupanica	Dhana	Datas Fram/Ta			
Supervisor	Phone	Dates From/To			
Position Held	Pay Rate Upon Leaving				
	\$				
Reason For Leaving:	•	1			
neason for Leaving.					
Duties:					



PERSONAL REFERENCES

List names & telephone numbers of references who are not related to you, e.g., co-workers, business associates, former supervisors

Name: _____Phone: _____

Address:				
Occupation:				
How Long Known:				
Name:Phone:				
Address:				
Occupation:				
How Long Known:				
Name:Phone:				
Address:				
Occupation:				
How Long Known:				
May we contact your references? ☐ Yes ☐ No				
JOB-RELATED SKILLS				
Please use this space to list any special skills you may have that relate to the position	on applied for:			
Please list any professional licenses, designations, certifications, etc. that may relar applied for. Including date granted, name of organization, and any other relevant				
1.				
2.				
3.				
HEADQUARTERS : 955 Ross Loop, Ste. 100 ● ☑ P.O. Box 870, DuPont, WA 98327 ● P (253) 722-5212 ● P	(800) 247-7328 ● F (253) 476-48			



APPLICANT'S CERTIFICATION AGREEMENT

- 1. I authorize the Company to solicit information regarding my character, criminal background, general reputation, insurance history, credit history, previous employment and similar background information, pursuant to applicable law. I further authorize the Company to contact any and all references and previous employers I have given. I hereby release all parties and persons connected with any such request for information from claims, liabilities, and damages for any reason arising out of the furnishing of such information, including but not limited to defamation, invasion of privacy or similar causes of action. If employed by the Company, I release the Company from any liability for future references it may provide regarding my work history at the Company. If I am refused employment on the basis of a background report, I have a right, upon written request from me within a reasonable time, to a complete and accurate disclosure of the nature and scope of the investigations requested by the Company.
- 2. I agree, if I am offered and accept a position, to conform to all existing and future Company policies, rules and regulations and I understand that the Company reserves the right to change wages, hours and working conditions within the Company's sole discretion. I ALSO UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER THE COMPANY OR I CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY OR NO REASON, WITH OR WITHOUT NOTICE. I also understand that no official of the Company other than the Chief Executive Officer of the Company has any authority to enter into an agreement for a specified period of time or make any agreement contrary to the foregoing.
- 3. I further understand that any employment offer is contingent upon my providing, within three (3) working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986, as amended.
- 4. If employed, I agree that if the Company advances any paid leave before it has been accrued, or advances or loans me any money during the course of my employment, the Company is authorized to deduct from my wages sufficient funds to repay such loans or advances.
- 5. I further certify that I am not engaged in any outside activity or business that could be considered in conflict with the interest of the Company or its customers. I will not become engaged in such activity or business during my employment if the Company employs me.
- 6. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts on this application (or on any required documents) may result in denial of employment or immediate termination of employment, regardless of when or how discovered.

Signature	Printed Name	Date
answered all questions complet	. , ,	and an parts of it and have
By signing this application for er	nployment, I certify that I underst	and all parts of it and have
7. I have read and reviewed the	information provided in this appli	cation and the above statements.