

# First Federal SAVINGS BANK of Angola

## FIRST FEDERAL SAVINGS BANK OF ANGOLA APPLICATION FOR EMPLOYMENT

First Federal Savings Bank of Angola is an equal employment opportunity employer dedicated to a policy of non-discrimination in employment based upon an individual's race, color, creed, religion, age, sex, national origin, ancestry, marital status, sexual orientation, disability, arrest/conviction record, or any other status protected under the law. In reading and answering the following questions, please keep in mind that none of the questions are intended to imply any limitations, illegal preferences, or discrimination based upon any non-job-related information. This application will be given consideration, but its receipt does not imply that the applicant will be interviewed or employed. Please contact the respective Department Manager at 260.665.7556 if you need an accommodation to participate in the application process.

POSITION APPLIED FOR: \_\_\_\_\_

Date Available to Start Work: \_\_\_\_\_

Days/Hours Available to Work:

Mon.: \_\_\_\_\_ Tue.: \_\_\_\_\_ Wed.: \_\_\_\_\_ Thu.: \_\_\_\_\_ Fri.: \_\_\_\_\_ Sat.: \_\_\_\_\_ Sun.: \_\_\_\_\_

### PERSONAL DATA

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City State Zip

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_  
( ) Area Code ( ) Area Code

### GENERAL INFORMATION

1. Have you ever applied for a job with this company in the past? If yes, please give the date of application and the position for which you applied. State your name at that time, if different from present name.	_____ Yes	_____ No
2. Have you ever been employed by this company in the past? If yes, please give dates of employment, positions held, and state your name while employed if different from present name.	_____ Yes	_____ No
3. Do you have any commitments to another employer that might affect your availability for employment with our company? If yes, please explain:	_____ Yes	_____ No
4. Are you authorized to work lawfully in the United States for First Federal Savings Bank of Angola? Note: In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the U.S. and to complete the required eligibility document form upon hire.	_____ Yes	_____ No



**EMPLOYMENT HISTORY****PRESENT & FORMER EMPLOYERS**

List present or most recent employer first. Please complete even if a résumé is attached. Attach additional sheet if necessary.

Company Name	Dates of Employment: From _____ To _____
Address	Supervisor (and phone number, if known)
City, State, Zip	Your name when employed, if different from present
Job Title and Duties	Reason for Leaving
Final Salary: \$ _____ per _____	May We Contact? _____ Yes _____ No
Company Name	Dates of Employment: From _____ To _____
Address	Supervisor (and phone number, if known)
City, State, Zip	Your name when employed, if different from present
Job Title and Duties	Reason for Leaving
Final Salary: \$ _____ per _____	May We Contact? _____ Yes _____ No
Company Name	Dates of Employment: From _____ To _____
Address	Supervisor (and phone number, if known)
City, State, Zip	Your name when employed, if different from present
Job Title and Duties	Reason for Leaving
Final Salary: \$ _____ per _____	May We Contact? _____ Yes _____ No

Please account for any time you were not employed after leaving school in the past seven (7) years. (You need not list any unemployment periods of one month or less.)

Time Period(s)

Reason(s) for Unemployment

If you were unable to list all past jobs or periods of unemployment on this form, please use an additional sheet.

**REFERENCES**

List three (3) business-related individuals that are not FORMER EMPLOYERS.

NAME	ADDRESS	CITY, STATE ZIP	PHONE NUMBER	OCCUPATION
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**OTHER JOB-RELATED EXPERIENCE**

Some people gain job-related experience in positions other than as an employee. For instance, an accountant may gain experience as a treasurer of a civic or school organization, or a manager may gain experience while working on civic projects, or in school organizations, or in PTA activities. Please list and describe any paid or unpaid activities, honors, experience, or training that might aid you in performing the job(s) for which you have applied and have not been listed previously in this application. (You may omit any activities, honors, memberships, or other items that tend to identify your race, sex, national origin, age, disability, or other personal traits that you prefer not to disclose.)

Please add any additional information (except that which identifies your race, sex, age, religion, national origin, disability or other non-job-related personal information) that you think may be relevant to a decision to hire you.

# IMPORTANT

**PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING**

Initials: \_\_\_\_\_

\_\_\_\_\_ By my signature and initials, I promise that the information provided in this employment application (and accompanying résumé, if any) is true and complete, and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment by First Federal Savings Bank of Angola if discovered at a later date.

\_\_\_\_\_ I authorize any person, school, current employer (except as previously noted), past employer(s), government or investigative agencies, and other organizations that may be named in this application form (and accompanying résumé, if any) to provide the company with relevant information and opinion that may be useful to First Federal Savings Bank of Angola in making a hiring decision, and I release such persons and organizations from any legal liability in making such statements.

\_\_\_\_\_ I understand that this application does not, by itself, create a contract of employment. I understand and agree that, if hired, my employment is at-will, and may, regardless of the date of payment of my wages or salary, be terminated at any time. I understand that only the President of First Federal Savings Bank of Angola is authorized to modify the at-will status.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_