

Application for Employment



Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name _____ Social Security # _____
Last First Middle

Address _____
Street City State Zip Code

Telephone # () Mobile/Beeper/Other Phone # () E-mail Address _____

Position(s) applied for _____ Date of application ____/____/____

Referral Source (Please check the appropriate category and name the source.)

- | | |
|--|---|
| <input type="checkbox"/> Walk-in _____ | <input type="checkbox"/> School _____ |
| <input type="checkbox"/> Employee _____ | <input type="checkbox"/> Job Fair _____ |
| <input type="checkbox"/> Advertisement _____ | <input type="checkbox"/> Staffing Agency _____ |
| <input type="checkbox"/> Company's Website _____ | <input type="checkbox"/> Government Employment Agency _____ |
| <input type="checkbox"/> Other Internet _____ | <input type="checkbox"/> Other _____ |

If necessary, best time to call you at home is..... : AM PM

May we contact you at work? ☐ Yes ☐ No

If **yes**, work number and best time to call:

() : AM PM

If you are under 18 and it is required, can you furnish a work permit? ☐ Yes ☐ No

If **no**, please explain _____

Have you submitted an application here before? ☐ Yes ☐ No

If **yes**, give date(s) and position(s) _____

Have you ever been employed here before? ☐ Yes ☐ No

If **yes**, give dates From ____/____/____ To ____/____/____

Are you legally eligible for employment in this country? ☐ Yes ☐ No

Date available for work ____/____/____

What is your desired salary range or hourly rate of pay?

\$ _____ Per _____

Type of employment desired: ☐ Full-Time ☐ Part-Time
☐ Educational Co-Op ☐ Seasonal ☐ Temporary

Will you relocate if job requires it? ☐ Yes ☐ No

Will you travel if job requires it? ☐ Yes ☐ No

If they have been explained to you, are you able to meet the attendance requirements of the position? ☐ N/A ☐ Yes ☐ No

Will you work overtime if required? ☐ Yes ☐ No

If **no**, please explain _____

Driver's license number required if driving may be required in the job for which you are applying:

_____ State _____

Have you ever been bonded? ☐ Yes ☐ No

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? ☐ Yes ☐ No

If **yes**, please provide date(s) and details _____

Employment History

Starting with your most recent employer, provide the following information.

Employer	Telephone # ()	Dates employed: Month / Year to Month / Year
Street address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?		Compensation (Final)
		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
		Commission/Bonus/Other Compensation \$

Summarize the type of work performed and job responsibilities.

What did you like most about your position?

What were the things you liked least about the position?

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Street address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?		Compensation (Final)
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Why did you leave?		Compensation (Final)
		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
		Commission/Bonus/Other Compensation \$

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What were the things you liked least about the position?

Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability. _____

If not addressed on previous page, have you ever been fired or asked to resign from a job?..... ☐ Yes ☐ No

If **yes**, please explain _____

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

<input type="checkbox"/> Word Processing _____	Years: _____	<input type="checkbox"/> Internet _____	Years: _____
<input type="checkbox"/> Spreadsheet _____	Years: _____	<input type="checkbox"/> Other _____	Years: _____
<input type="checkbox"/> Presentation _____	Years: _____	<input type="checkbox"/> Other _____	Years: _____
<input type="checkbox"/> E-mail _____	Years: _____	<input type="checkbox"/> Other _____	Years: _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors.
If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known
			()	
			()	
			()	

Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

In your current or a prior job, have you ever written instructions or directions to be followed by employees or customers?

☐ Yes ☐ No ☐ Not Applicable

If **yes**, please explain: _____

Is there any other job-related information you want us to know about you? _____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____/____/____

**WAYNE WESTLAND FEDERAL CREDIT UNION
TERMS AND CONDITIONS OF EMPLOYMENT**

I UNDERSTAND AND AGREE THAT:

1. ANY MATERIAL MISREPRESENTATION OR DELIBERATE OMISSION OF A FACT IN MY APPLICATION MAY BE JUSTIFICATION FOR REFUSAL OF OR, IF EMPLOYED, TERMINATION FROM EMPLOYMENT.
2. I GRANT THE CREDIT UNION THE RIGHT TO MAKE A THOROUGH INVESTIGATION OF MY ENTIRE WORK HISTORY AND TO VERIFY ALL DATA GIVEN IN MY APPLICATION FOR EMPLOYMENT, RELATED PAPERS OR ORAL INTERVIEWS. I RELEASE FROM LIABILITY ANY PERSON GIVING OR RECEIVING ANY SUCH INFORMATION. I UNDERSTAND THAT ANY DEROGATORY INFORMATION DISCOVERED AS A RESULT OF THIS INVESTIGATION MAY PREVENT MY BEING HIRED OR, IF HIRED, COULD RESULT IN IMMEDIATE DISMISSAL.
3. ALTHOUGH MANAGEMENT MAKES EVERY EFFORT TO ACCOMMODATE INDIVIDUAL PREFERENCES, BUSINESS NEEDS MAY AT TIMES MAKE THE FOLLOWING CONDITIONS MANDATORY:
 - *OVERTIME
 - *A ROTATING WORK SCHEDULE
 - *WORK ASSIGNMENT AT MORE THAN ONE LOCATION, OR
 - *A WORK SCHEDULE OTHER THAN OUR STANDARD SCHEDULED WORK WEEK.
4. MY JOB DUTIES AND RESPONSIBILITIES AS STATED IN THE JOB DESCRIPTION MAY BE REVISED AND UPDATED AS THE NEED ARISES. THIS REVISION IS NECESSARY BECAUSE OF THE CONSTANTLY CHANGING TECHNOLOGY, REGULATIONS AND SERVICES OFFERED BY THE CREDIT UNION. I FURTHER UNDERSTAND THAT THE JOB DESCRIPTION IS NOT ALL INCLUSIVE AND I WILL PERFORM OTHER REASONABLY RELATED BUSINESS DUTIES ASSIGNED BY MANAGEMENT.
5. I UNDERSTAND THAT THE CREDIT UNION HAS ADOPTED A NO-SMOKING POLICY IN ORDER TO PROVIDE A SMOKE-FREE ENVIRONMENT FOR STAFF AND MEMBERS. I UNDERSTAND THAT I MAY NOT SMOKE IN ANY CREDIT UNION BUILDING.
6. THIS IS NOT A CONTRACT.

DATE

APPLICANT SIGNATURE

**WAYNE WESTLAND FEDERAL CREDIT UNION
DISCLOSURE OF USE OF CONSUMER REPORTS
FOR EMPLOYMENT PURPOSES**

AS PART OF THE PROCESS OF DETERMINING YOUR ELIGIBILITY FOR CURRENT OR FUTURE EMPLOYMENT OPPORTUNITIES, THE CREDIT UNION MAY OBTAIN "CONSUMER REPORTS" CONTAINING INFORMATION FROM "CONSUMER REPORTING AGENCIES" ABOUT SUCH MATTERS AS YOUR CREDITWORTHINESS, CREDIT HISTORY, CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, OR MODE OF LIVING. IN SOME CIRCUMSTANCES, WE MAY OBTAIN AN "INVESTIGATIVE CONSUMER REPORT", WHICH IS A SPECIAL KIND OF CONSUMER REPORT IN WHICH INFORMATION ON YOUR CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, OR MODE OF LIVING IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH YOUR NEIGHBORS, ASSOCIATES OR OTHERS WHO HAVE KNOWLEDGE ABOUT YOU.

THIS IS YOUR COPY. DO NOT RETURN THIS COPY WITH YOUR APPLICATION.

**WAYNE WESTLAND FEDERAL CREDIT UNION
AUTHORIZATION OF CONSUMER REPORTS
FOR EMPLOYMENT PURPOSES**

I HAVE RECEIVED A **DISCLOSURE OF USE OF CONSUMER REPORTS FOR EMPLOYMENT PURPOSES** AND I AUTHORIZE THE CREDIT UNION TO OBTAIN ANY CONSUMER REPORTS IT MAY WISH TO USE NOW OR IN THE FUTURE FOR EMPLOYMENT PURPOSES (INCLUDING DECISIONS ON HIRING, PROMOTION, TRANSFER, ETC.).

Date

Applicant Signature