



Credit Union
301 Jackson St
Oconto Falls, WI 54154-1120
920-848-2793

Revised 9/2014

APPLICATION FOR EMPLOYMENT

Federal and state laws prohibit discrimination in employment practices on account of race, creed, color, national origin, ancestry, sex, age, marital status, veteran status or handicap.

Last Name, First Name, MI

Date

Is any additional information relative to change of name, use of an assumed name or nickname necessary to enable a check on your work record? Explain.

Present Address (Include Street, City, State and Zip Code)

Phone #

Last Previous Address (If at present address less than two years)

Are you over 17 years of age?

Yes No

If under 18, do you have working papers?

Yes No

Are you legally employable within the United States at the present time?

Yes No

Have you ever been convicted of a crime which may cause you not to be bonded?

Yes No

Have you ever applied to this organization for a job before? If yes, when?

Were you ever employed by this organization? Yes No

Social Security # _____

Position Desired: _____

Salary Desired: \$ _____

Status (circle one): Full/Part-time/Summer/Student

Earliest start date: _____

What brought you to this organization?

- Newspaper Ad
- Employment Agency
- School
- State Employment Service
- Friend/Employee
- On my own
- Other source

At which location would you be willing to work?

- Oconto Falls 301 Jackson St
- Oconto 405 Pecor St
- Suring 717 E Main St

Work Experience— Account for all employment since high school or last ten years, whichever is less, with most recent experience first.

From Mo/Yr	To Mo/Yr	Employer Name, address	Principal Duties	Salary Beg / End	Supervisor's Name, Title, Number	Reason for Leaving

Educational Background			
Name	Address	Course of Study	Graduate? If yes, state degree
High School:			
College/Tech/Bus School:		Major: Minor:	
Graduate School:		Major: Minor:	

Are you still in school? If yes, where?	
How many courses are you currently taking?	Number of Credits:
What is your course of study?	
Special Skills (fill in only if job related):	

Personal Reference: Give the name, address and telephone number of three Personal references other than a relative or employer.

1. _____

2. _____

3. _____

Employee Responsibility to the organization. (Please read before signing.)

As a condition of my employment, I accept the principle that the welfare of the organization depends upon the conduct and honesty of the staff and upon the trust and confidence of people. Our member-owners rightly expect honesty, security and confidentiality in their affairs. I therefore agree to the following:

1. **I agree to give no unauthorized information relative to the accounts of the organization or its relation with others; and to discuss no matters of a confidential nature relating to the organization's affairs unless such discussion is in the necessary course of the organization's business and is in accordance with the organization's policy.**
2. **I also agree to inform the management of the organization, without delay, of any fraud, false entry, substantial error, embezzlement or employee misconduct, which I discover or know to have taken place in any records, property or funds of the organization, and to report any transaction or matter that seems damaging to the organization.**

I acknowledge and understand that any violation of this Agreement may result in the termination of my employment.

Name

Signature

Date

Please also read before signing. If you have any questions regarding this statement, please ask them of any interviewer before signing.

In the event of my employment with this organization, I will comply with all the rules and regulations as set forth in the organization's policy manual or other communications distributed to staff. I understand that such employment, depending upon requirements of the position, may be conditioned upon a favorable health evaluation which may include a physical examination by a doctor selected by the organization and to which I hereby assent. I further agree to complete all necessary forms in that regard. Additionally I authorize the Organization to supply my employment record, in whole or in part, and in confidence, to any prospective employer, government agency, or other party, with a legal and proper interest.

I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that falsification could result in termination of my employment. In consideration of my employment, I agree to conform to the rules and regulations of the Organization. I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the organization or myself. This is not a contract of employment. Any individual who is hired may voluntarily leave employment upon proper notice and may be terminated by the employer at any time. Any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. I further understand and agree that any employment will be at the sole discretion of the organization. I understand that past employers, educational institutions, and where appropriate, the military, will be contacted to verify references. I, the undersigned authorize(s) N.E.W. Credit Union to verify my credit history, creditworthiness, employment history, and identification by any necessary means, including obtaining a credit report from a credit reporting agency.

For reference purpose,

You may **You may not** **contact my present employer.**

I hereby acknowledge that I have read the above statement and understand the same.

Applicant's Signature Date