



Alliance Community Bank

Application for Employment (Please Print)

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religious persuasion, marital status, political belief, or disability that does not prohibit performance of essential job functions.

Date: _____

I. Personal Information

Name: First Middle Last

Present Address

Telephone

E-mail address

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, Green Card, etc.) within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Position Applied For: _____

1. Is there any information we would need about your name or use of another name for us to be able to check your work record? Please specify:

2. Do you have any relatives who are presently (or have formerly been) employed by this company?

3. How were you referred to us? _____

II. Educational History

School Name/Location / Years Completed / Degree/Diploma

High School: _____

College: _____

Tech. Training: _____

Other: _____

III. Employment Record *(Please include all employment for the last five years.)*

1. _____
Company Name (Current or Most Recent Employer) Job Description

_____ Dates Employed: _____
Address From To

_____ _____
Manager / Supervisor Telephone

Reason For Leaving

2. _____
Company Name Job Description

_____ Dates Employed: _____
Address From To

_____ _____
Manager / Supervisor Telephone

Reason For Leaving

3. _____
Company Name Job Description

_____ Dates Employed: _____
Address From To

_____ _____
Manager / Supervisor Telephone

Reason For Leaving

NOTE: Use a separate sheet to list additional employers, if necessary. We will contact all of the employers listed on this application unless you specifically exclude them below. Please list any employers you do not want us to contact and your reason for the exclusion:

(Employer's Name)

Reason

(Employer's Name)

Reason

IV. References (Please do not include relatives or former employers.)

1.

Name

Years Known

Address

Telephone

Occupation

2.

Name

Years Known

Address

Telephone

Occupation

3.

Name

Years Known

Address

Telephone

Occupation

V. Work Availability

1. If your application receives favorable consideration, when will you be available to begin work?

- 2. Are you applying for Full Time or Part Time? () Full () Part
- 3. Do you have any objection to working overtime? () Yes () No
- 4. Can you work overtime without prior notice? () Yes () No
- 5. Can you work on Saturday? () Yes () No
- 6. Can you travel to all ACB locations? () Yes () No

VI. Salary / Hourly Rate Requirements

If your application receives favorable consideration, what salary/hourly rate would you require?

\$ _____ per _____

VII. Agreement

It is our policy to check references as part of our hiring process. This may include contacting your former employers, as well as other business associates. We will ask a series of questions about your work experience, character, education and personality.

After reading this policy, please indicate your agreement by signing in the space provided.

I have read and fully understand the foregoing and voluntarily consent to allow the Organization to check my references. Questions may be asked about my work experience, personality, personal habits and education.

Applicant Signature:

Date:

Received by: _____

Date: _____