

EMPLOYMENT APPLICATION

Position you are applying for:	ou are applying for: Hourly salary desired:												
Hours Desired: □ Full-Time □ Part-Ti	me If neces	sary, I am able t	o work overtime.	□Yes	□No								
I will be able to report to work days after being notified that I am hired.													
PERSONAL INFORMATION													
Last Name		First Name			Middle								
Address		City		State	-	Zip Code							
Home Phone:	Cell Phone:		Email:										
Social Security Number:			Date of Birth:_										
Are you a U.S. citizen? ☐ Yes ☐ No													
Are you legally authorized to work for any employer in the United States?													
	EDUCA	TION											
None	N 01 "		ears pleted Field of Study		Graduate or Degree								
Name & Location High School:		Completed	Fleid of Stu	iuy	Graduate	or begree							
College/University:													
Business/Technical:													
Other:													
	EMPI OVMEN	T HISTORY											
EMPLOYMENT HISTORY List employment starting with your most recent position. Account for time during this period that you were unemployed by stating the nature of your activities. If you have less than four places of employment, include personal references to be contacted. May we contact your current employer? Yes No													
Employer name & Address:	Employer name & Address: Job		Title & Major Duties:		Start Date:	End Date:							
					Reason for le	eaving:							
Pay: \$ Per:	Supervisor:	Pho											
Employer name & Address:	Job Title & Major Duties:				Start Date:	End Date:							
					Reason for le	eaving:							
Pay: \$ Per:	Supervisor:	Pho	ne:										

Equal Opportunity Employer: It is the policy of FiCare Federal Credit Union to provide equal employment opportunities for all applicants and employees without regard to race, religion, national origin, ancestry, age, color, sex, gender identity, gender expression, physical or mental disabilities, medical condition, pregnancy, military or veteran status, marital status, sexual orientation, genetic information or any other characteristic protected by applicable law.



EMPLOYMENT APPLICATION

			FMPI OVMENT H	ISTORY (continued)						
			Erii Eometri	io rotti (oontinaca)						
Employer name & Address:		yer name & Address:		Job Title & Major Duties:		Start Date:	End Date:			
_		_				Reason for leaving:				
Pay:	\$	Per:	Supervisor:	Phone:						
Employer name & Address:				Job Title & Major Duties:		Start Date:	End Date:			
_						Reason for leaving:				
Pay:	\$	Per:	Supervisor:	Phone:						
	·					1				
			PROFESSION	AL REFERENCES						
List b	oelow two	individuals who are familia	ar with your professional attri	butes. Do not use relative	s or former supervisors	as references				
Nam			Phone: Title/Employer:							
Nam	e:		Phone:	ne: Title/Employer:						
			ACKNOWI EDGEME	NT & AUTHORIZATIO	N .					
Care	fully read	l each statement below a	nd initial beside the stateme							
		l certify that all answ	vers given herein are true ar	nd complete to the best o	of my knowledge.					
l authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.										
		In the event of emp may result in termin	loyment, I understand that ation.	false or misleading info	mation given in my a	pplication or i	nterview(s)			
		Signature	of Applicant		Date		_			

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