

Application for Employment

NorState Federal Credit Union

78 Fox St.

Madawaska, Maine 04756

Please Print

Applicants who require assistance to complete the application and/or interview process should notify the Human Resources Department.

Position(s) applied for: _____ Date of Application: ____/____/____

Referral Source: Advertisement Employee Relative Government Employment Agency Walk-in
 Private Employment Agency Other _____

Name of source (if applicable) _____

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone #: () _____ Mobile/Beeper/Other Phone #: () _____ Social Security #: _____

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)...../____/____

Have you 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...../____/____

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

Will you relocate if job requires it?Yes No Will you travel if the job requires it?Yes No

The credit union is open as early as 7:00 AM and as late as 6:00 PM at different times throughout the year are you available for these hours?Yes No

If required, will you work on special projects which may cause overtime?Yes No

Have you ever been bonded?Yes No

Have you been convicted of a crime in the last seven (7) years?Yes No

If yes, please explain _____

CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT, EACH INSTANCE AND

EXPLANATION WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH YOU ARE

APPLYING.

Driver's License number if driving is an essential job function _____ State _____

AN EQUAL OPPORTUNITY EMPLOYER

NorState Federal Credit Union does not discriminate against any applicant or employee on the basis of sex, age, religion, national ancestry, nationality, disability or veteran status

Employment History

Provide the following information for your past and current employers, assignments, or volunteer activities, starting with the most recent (use additional sheets if necessary)

Employer	Telephone ()	Dates Employed From To		Summarize the type of work performed and job responsibilities
Address				
Job Title		Hourly Rate/Salary Starting		
Immediate Supervisor and Title		\$	Per	
Reason for leaving		Hourly Rate/Salary Final		
May we contact for references? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
Employer	Telephone ()	Dates Employed From To		Summarize the type of work performed and job responsibilities
Address				
Job Title		Hourly Rate/Salary Starting		
Immediate Supervisor and Title		\$	Per	
Reason for leaving		Hourly Rate/Salary Final		
May we contact for references? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
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Employer	Telephone ()	Dates Employed From To		Summarize the type of work performed and job responsibilities
Address				
Job Title		Hourly Rate/Salary Starting		
Immediate Supervisor and Title		\$	Per	
Reason for leaving		Hourly Rate/Salary Final		
May we contact for references? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	

Educational Background

A. List the last three(3) schools attended, starting with the most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank E. Minor fields of study (if applicable).

A. School	B. Number of Years Completed	C. Degree Diploma	D. GPA Class Rank	E. Major	F. Minor

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	Telephone	Years Known

Additional Information (optional)

Organization	Offices Held

List special accomplishments, publications, awards etc. (Optional)

List any additional information you would like us to consider.

Attach a copy of resume if available

Comments _____

Skills and Qualifications _____

The credit union will contact and obtain information from all references, employers, educational institutions and otherwise verify the accuracy of the information contained in this application.

This application is current for only 60 days. At the conclusion of this time, if the Credit Union has not contacted you and you still wish to be considered for employment, it will be necessary to fill out a new application.

All Credit Union employees are employees at will. The Credit Union reserves the right to terminate with or without cause and without prior notice, and the employee reserves the same right to terminate his/her employment at any time, with or without cause and without prior notice, except as may be required by law.

The Credit Union is required by law to provide proof of identity and legal work authorization.

I represent and warrant that all of the information in this application is accurate and truthful.

I understand that if I am employed, and misrepresentation or material omission made by me on the application will be sufficient cause for immediate discharge from the employer's service whenever it is discovered.

Signature of Applicant: _____ **Date:** _____

I understand that NorState Federal Credit Union may obtain a consumer credit report solely for the purpose of employment as permitted by the Maine Fair Credit Report Act and authorize this action.

Signature of Applicant: _____ **Date:** _____



Employment Screening Services

APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

COMPANY NAME requires, as a condition of employment, and/or continued employment, that all applicants consent to and authorize a verification of the information submitted on their application or resume. Please read this statement carefully.

I, the undersigned applicant, do hereby certify that the information provided by me for the purpose of employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal.

This release and authorization acknowledges that this Company may now, or at any time while I am employed, conduct a verification of my education, employment history, three (3) years of drug, alcohol and accident history from all Department of Transportation (DOT) – regulated employers, credit history, and motor vehicle records. In addition this company may contact personal references, require that I provide a urine specimen to be tested for the presence of drugs or alcohol, and receive any criminal history record information pertaining to me which may be in the files of any Federal, State or Local criminal justice agency in any state, and/or other information as deemed necessary to fulfill the job requirements

I authorize CBCInnovis Employment Screening Services and any of its agents and/or employees to disclose verbally and in writing the results of this verification process to the designated authorized representatives of this Company. The results will be used to determine employment eligibility under this Company's employment policies.

I have read and understand this release and consent, and I authorize the background verification. I authorize persons, schools, current and former employers, and other organizations and Agencies to provide Employment Screening Associates with all information that may be requested, and I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

I do hereby agree to forever release and discharge this Company, its agent, CBCInnovis Employment Screening Services, and their associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any agency arising from the retrieving and reporting of information. According to the Federal Fair Credit Reporting Act, I am entitled to know if employment was denied based on information obtained by my prospective employer, and to receive, upon written request, a disclosure of the public record information and of the nature and scope of the investigative report. If I am a resident of Minnesota, California or Oklahoma only and would like a copy of the investigative report, I will check here .

Please provide all requested information and provide addresses for the last seven- (7) years

(Applicant's Name, Printed - Last, First Middle) (Maiden Or Other Name(s) Used)

(Current Address - Street, City, State, Zip) (How Long)

(Previous Address - City, State, Zip) (How Long)

(Previous Address - City, State, Zip) (How Long)

(Social Security Number) (Date of Birth - for confirmation of ID only)

(Name - exactly as it appears on Driver's License) (Drivers License Number) (State)

Yes **No**
(Authorization to contact present employer for reference) (Signature) (Date)