

FOR OFFICE USE ONLY			
Possible Positions:			
Position:			
Date & Rate:			

# **Application for Employment**

TO APPLICANT: We deeply appreciate your interest in our organization. Thank you for taking the time to complete this application.

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency, including but not limited to information regarding credit data, personal character, general reputation and mode of living. **This list, however, is not exhaustive of the grounds on which discrimination is prohibited.** 

(PLEASE PRINT PLAINLY) **PERSONAL** Middle Social Security No.: Telephone No.: Address: \_ No. Street Citv State 7IP Are you legally eligible for employment in the U.S.A.? Yes \_\_\_\_ No \_\_\_\_ if hired, you are required to submit proof of your eligibility to work in the U.S.A. Are you over the age of eighteen? Yes \_\_\_\_ No \_\_\_ if no, hire is subject to verification that you are of minimum legal age. Preferred Email for Pronouns: Correspondence:\_\_\_\_\_ Position(s) applied for: Were you previously employed by us? Yes \_\_\_\_ No \_\_\_ if yes, when? \_\_\_\_\_ Do any of your family members work for us? Yes \_\_\_\_ No \_\_\_ if yes, who? \_\_\_\_ If your application is considered favorably, on what date will you be available to work? Are there any other job related experiences, skills, or qualifications which will be of special benefit in the job for which you are applying?

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## **EMPLOYMENT HISTORY**

# List below present and past employment, beginning with your most recent

I	Name and Address of Company And Type of Business	Fre	om	Т	o	Reason for	Name of Supervisor		
		Mo.	Yr.	Mo.	Yr.	Leaving			
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		Describ	e the wo	rk you did	l:				
	Telephone:								
	Name and Address of Company And Type of Business	Fre	om	Т	o	Reason for Leaving	Name of		
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Ш	Name and Address of Company And Type of Business	Fre	om	Т	o	Reason for	Name of Supervisor		
		Mo.	Yr.	Mo.	Yr.	Leaving	Supervisor		
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IV	Name and Address of Company								
	And Type of Business		om	To Va				Reason for Leaving	Name of Supervisor
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	Telephone:								
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	oloyer II? Yes No								
Emp	oloyer III? Yes No								
Emp	loyer IV? Yes No	<u>-</u>							
				Sign	ed				

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#### RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed		ar	Did You Graduate?	List Diploma or Degree	
Elementary			5	6	7	8	☐ Yes ☐ No	
High			1	2	3	4	☐ Yes ☐ No	
College			1	2	3	4	☐ Yes ☐ No	
Other (Specify)			1	2	3	4	☐ Yes ☐ No	
		FESSIONAL REF		NCE	S			
	Name and Occupation	Addre	SS				Phone Nur	nber

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May we email you to follow up on this application? You	es No	

May we telephone you to follow up on this application at home? Yes \_\_\_\_\_ No \_\_\_\_

If yes, what is the best time to call?

May we telephone you to follow up on this application at work? Yes \_\_\_\_\_ No \_\_\_\_

What is your business telephone number?

#### PLEASE READ AND SIGN BELOW

If yes, what is the best time to call?

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in a writing signed by an officer.

Signature of Applicant
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**Please Print Clearly:** 



# **Applicant Release**

Please submit a resume with this Employment Application to Arapahoe Credit Union.

In connection with my application for employment (including contract for services) and as a condition of continuing employment, I understand that investigative background inquiries are to be made on me including consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, and experience along with reasons for termination of employment from previous employers. Further I understand that the company will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose:

Print Full Name	Sex: Male Female
Print other names you have used:	Dates used:
Current Address	
CityState Zip	County How Long
Date of Birth (mm/dd/yy):	Social Security #:
Current Drivers License #:	Issuing State:
Other Drivers License #s:(list last 7 years only)	Issuing State:
knowledge. I have read and understand the without reservation, any party or agency c and release all parties involved from liabili	ovided by me is true and complete to the best of my at this consent to release information and I authorize ontacted to furnish the above mentioned information ity and responsibility for doing so. I hereby consent to bahoe Credit Union and/or any of their agents. This is original, fax, or copy form.
Applicant's Signature	Date
В	usiness Use Only
Authorized by:	Date

Name



### Fair Credit Reporting Act Disclosure and Authorization

As an applicant for employment or a current employee of this organization, you are a consumer with rights under the Fair Credit Reporting Act. When any of the following circumstances exist, this organization may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you when: (1) considering your application for employment, (2) making a decision whether to offer you employment, (3) deciding whether to continue your employment (if you are hired), or (4) making other employment-related decisions directly affecting you.

For explanation purposes, a "consumer reporting agency" is a person or business which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer reports to other, such as this organization.

A "consumer report" means any written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for employment purposes.

An "investigative consumer report" means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates reported on or with others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigation requested as well as a written summary of your rights under the Fair Credit Reporting Act.

#### **Authorization**

De cianing below I house, voluntarily authorize this appointing to abtain aithor a

by signing below, i hereby voluntarily authorize this organization to obtain either a
consumer report or an investigative consumer report about me from a consumer reporting
agency and to consider this information when making decisions regarding my employment at
this organization. I understand that I have rights under the Fair Credit Reporting Act, including
the rights discussed above.

Date