APPLICATION FOR EMPLOYMENT

(PLEASE PRINT PLAINLY)

We are an Equal Opportunity Employer. This application is not intended to elicit information for the purpose of discrimination

Federal and State laws prohibit discrimination in employment because of race, color, religion, sex, age, national origin, handicapped condition, status as a disabled or Vietnam Era veteran, sexual orientation, military status or any other basis prohibited by statute.

PERSONAL		Date:				
NameLast	First		Social Security No			
D 4 11						
No	o. St	reet (City	State	Zip	
How many years have you	lived at this addre	ess?		Telephone No		
Previous addressNo.				How long did you live there?		
No.	Street	City State	Zip			
Position(s) applied for 1.				_Rate of pay expected \$	per	
2.				Rate of pay expected \$	per	
				nours of part-time		
Are you available to work o			<i>J</i> ~			
_						
If hired, on what date will ye	ou be available to	start work?				
Please list all names that you	ı have been know	n by other than the nar	me on th	nis application.		
Are you under 18 years of a	ige? Yes 🔲 🔝	No 🗖				
Are you either a U.S. citizer proof of lawful work status		0 0	main an	d work in the U.S.? (You will be req	uired to furnish No	

EDUCATIONAL BACKGROUND

GRAMMAR OR GRADE HIGH SCHOOL COLLEGE POST GRADUATE BUSINESS OR TRADE OTHER Tyes No OTHER CEmployment at Fulton Savings Bank requires at least a high school diploma or equivalent) PERSONAL REFERENCES Give three personal references who have known you for at least three years. Do not give relatives, your doctor(s), former employees	
HIGH SCHOOL COLLEGE POST GRADUATE POST GRADUATE BUSINESS OR TRADE OTHER Tyes No COTHER PERPLOYMENT at Fulton Savings Bank requires at least a high school diploma or equivalent) PERSONAL REFERENCES Give three personal references who have known you for at least three years. Do not give relatives, your doctor(s), former employees Name and Occupation Address Ph 1 2	
COLLEGE Yes	
POST GRADUATE BUSINESS OR TRADE OTHER OTHER PERSONAL REFERENCES Give three personal references who have known you for at least three years. Do not give relatives, your doctor(s), former employees Name and Occupation Address Ph 1	
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BUSINESS OR TRADE OTHER Yes	
OTHER Yes No	
(Employment at Fulton Savings Bank requires at least a high school diploma or equivalent) PERSONAL REFERENCES Give three personal references who have known you for at least three years. Do not give relatives, your doctor(s), former employees Name and Occupation Address Ph 1	
1	
Name and Occupation Address Ph 1	
2	one Number
2	
3.	
GENERAL	
Skills	
Computer Skills Yes No	
Word Processor Skills Yes No	
Other (Describe)	
PRIOR WORK HISTORY (List in order, last or present employer first) You may include any verified work performed on a volunteer basis.	
	REASON FOR LEAVING
FROM TO Telephone No. AND TITLE	LEAVING
Position:	

PRIOR WORK HISTORY (Continued)

DATES		NAME AND ADDRESS OF EMPLOYER	SUPERVISOR NAME	REASON FOR			
FROM	TO	Telephone No.	AND TITLE	LEAVING			
Position:							
	Describe in detail the work you did:						
		•					
DATE	20	NAME AND ADDRESS OF EMPLOYER		DEACONFOD			
DATE			SUPERVISOR NAME AND TITLE	REASON FOR LEAVING			
FROM	ТО	Telephone No.	AND IIILE	LEAVING			
Position:							
Describe in detail the work you did:							

Occasionally the form of an application blank makes it difficult for an individual to adequately summarize his or her complete background. To assist us in finding the proper position for you in our Institution, use the space below to summarize any additional information necessary to describe your full qualifications.

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with this Institution (Fulton Savings Bank) will be based only on your merit and on no other consideration.

PLEASE READ CAREFULLY APPLICANT'S CERTIFICATION AND AGREEMENT

I understand that my employment may be terminated with or without cause or notice, at any time, at either my option or that of the Institution (Fulton Savings Bank). I understand that no management representative has any authority to enter into any agreement continuing employment for any specific period of time or which is contrary to the foregoing without written approval of the Institution. I give the Institution permission to contact all or any of my previous employers and references and authorize them to provide all information requested of them by the Institution. After a tentative offer of employment has been made, if requested by the Institution, I agree to take a job-related medical examination at no personal expense and authorize the examining physician to disclose the findings to the Institution. I understand that any offer of employment is conditioned upon receipt of satisfactory referenced and satisfactory completion of such job-related medical examination.

I have provided truthful and complete responses to all inquires in the application and understand that the discovery of any falsification or omission constitutes a ground for immediate dismissal. If employed, I will abide by the Institution's rules and regulations, which I understand are subject to change by the Institution. Signed under penalties of perjury this ______day of _______, 20_____ Signature of Applicant _____ In connection with your application for employment the Institution may have an investigative consumer report made on you, which would include information as to your character general reputation and personal characteristics. You have the right to request that the Institution completely and accurately disclose to you the nature and scope of the investigation to be undertaken. Any such request must be made in writing to the Institution within a reasonable time after the date of this application. DO NOT WRITE BELOW THIS LINE INTERVIEW Yes No Date_____Hour___ Result of Interview _____ Acceptable for Employment? _____Starting Rate _____Starting Date _____ Occupation _____ Interviewed by_____