



ACMG Federal Credit Union Employment Application

Date _____

We appreciate your interest in employment and are interested in your background and qualifications. Please answer all questions as thoroughly as possible so we may review the information in consideration of employment. We are an Equal Opportunity Employer and conduct all human resources functions for all jobs without regard to age, creed, race, color, sex, sexual orientation, gender identity or expression, national origin, marital status, disability, military status, domestic violence victim status, criminal or arrest record, predisposing genetic characteristics or a known association with any of these or any other category protected by law.

Name _____
Last First Middle

Social Security Number _____

Address _____
Street City State Zip

Contact Telephone Number () _____

Are you legally employable in the United States? Yes No

Are you 18 years of age or older? Yes No

Position(s) applying for: _____

Expected Rate of Pay \$ _____ /hr.

Preference for Full-time Part-time

When are you available to begin work?: _____

Have you ever been employed by ACMG? Yes No

If yes, when and in what capacity? _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

State why you should be considered for this position: _____

List your skills relating to the position for which you are applying: _____

EDUCATION

School	School Name / Address	Course of Study	Last Year Completed				Did You Graduate?		List Diploma, Degree or Studies
			1	2	3	4	Yes	No	
High School									
College									
Other (Specify)									

EMPLOYMENT HISTORY -- Begin with your present or most recent position.

Include military service and volunteer activities. Exclude groups that indicate race, color, religion, sex, age or national origin.

Employer	Dates Employed From To		Job Duties
Address			
Job Title	Reason for Leaving		
Immediate Supervisor/Telephone#			

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REFERENCES: List three work-related references (not related to you) who can describe your work-related skills.

NAME	ADDRESS/PHONE	OCCUPATION	YEARS KNOWN
1			
2			
3			

YOU MUST READ AND SIGN BELOW FOR A VALID EMPLOYMENT APPLICATION

My signature indicates 1) All information contained in this application is true and complete to the best of my knowledge. 2) Material misrepresentation of information on this application is grounds for employment termination. 3) I authorize investigation of all statements contained herein and the references listed above to give any / all job-related information they may have. 4) I hold harmless all parties from all liability for any damage that may result from furnishing information. 5) I understand and agree that, if hired, my employment is at will, for no definite period and may be terminated by either party at any time without any prior notice, with or without cause.

SIGNATURE OF APPLICANT

DATE