

## **EMPLOYMENT APPLICATION**

Please complete the entire application.

It is the policy of CAPE Federal Credit Union to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

1. Applicant Information
Applicant Full Name:
Home Address:
City/State/ZIP:
Daytime Phone: Evening phone:
Mobile Phone:
Social Security Number (Last 4 digits):
Driver's License (State/Number):
2. Position for Which You Are Applying:
Full or Part Time?
3. Salary Desired: \$per
4. Are you at least 18 years old?YesNo
5. If applicable, are you available to work overtime?YesNo
6. If you are offered employment, when would you be available to work?
7. If hired, are you able to submit proof that you are legally eligible for employment in the
United States?YesNo
8. Have you ever been convicted of a felony or misdemeanor?
Yes, I was convicted ofon
(date) in (city), (state)
No

EMPLOYMENT.			
9. Have you ever served in the military?Yes	No		
If so, did you receive anything other than an honorable discharge?	·	Yes	_No
10. Applicant Employment History			
List your current or most recent employment first. Please list all joservice) which you have held, beginning with the most recent, and additional space is needed, continue on the back page of this application.	list and expl		•
Employer Name:  Supervisor Name:  Address:  City/State/ZIP:  Job Duties:  Reason for Leaving:  Dates of Employment (Month/Year):			
Employer Name:  Supervisor Name:  Address:  City/State/ZIP:  Job Duties:  Reason for Leaving:  Dates of Employment (Month/Year):			
Employer Name:  Supervisor Name:  Address:  City/State/ZIP:  Job Duties:  Reason for Leaving:  Dates of Employment (Month/Year):			
11. Applicant's Education and Training			
College/University Name and Address:			<del></del>
Did you receive a degree?YesNo			
If yes, degree(s) received:			
High School/GED Name and Address:			

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO

Other Training (gra	duate, technical, voc	ational):		
Please indicate any	current professional	l licenses or certifica	ates that you hold:	<u>-</u>
Awards, Honors, Sp	ecial Achievements:			- -
12. References				_
	ne persons listed bel		gnature below, you give CAPE Federal Cro to hold those persons harmless for any in	
Name: Address: City/State/ZIP: Telephone: Relationship:  Name: Address: City/State/ZIP: Telephone: Relationship:				
Name:Address:City/State/ZIP:Telephone:Relationship:				

## **CERTIFICATION**

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize CAPE Federal Credit Union to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Manager/CEO, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of CAPE Federal Credit Union, except in a specific written contract of employment signed on behalf of the organization by its Manager/CEO, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AGREE TO ITS TERMS.	AND I UNDERSTAND AND
APPLICANT SIGNATURE	DATE