# **Application For Employment**

We consider applicants for all positions without regarding race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Position Applied For:		Date:	
How Did You Learn About Us?			
Advertisement	Friend	Walk-I	n
Employment Agency	Relative	Other	
PERSONAL INFO			
Last Name:	First Name:	Middle	e Initial:
Address:			
City / State / ZIP:			
Phone:	Social Security Number:		
Have you ever filed an application with	us before?	☐ Yes If Yes, Give Date:	□ No
Have you ever been employed with us	before?	Yes If Yes, Give Date:	□ No
Are you currently employed?		Yes	🗌 No
May we contact your present employe	r?	Yes	🗌 No
Are you prevented from lawfully become country because of Visa or Immigration Proof of citizenship or immigration status w	n Status? iill be required upon employment	☐ Yes	🗌 No
What date would you be available for w	work?		
Are you available to work:	Full Time		Part Time
Are you currently on "lay-off" status ar	nd subject to recall?	Yes	🗌 No
Can you travel if a job requires it?		Yes	🗌 No
Have you been convicted of a felony wi Conviction will not necessarily disqualify an o	-		
If Yes, please explain:			

#### EDUCATION

	Name Address	Course of Study	Years Completed	Diploma / Degree
Elementary School				
High School				
Undergraduate College				
Graduate / Professional				

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Indicate any foreign languages you can speak, read and/or write:

Describe any specialized training, apprenticeships, skills and extra-curricular activities:

Describe any job-related training received in the United States Military:

#### Check Skills / Equipment Operated

Typewriter	Microsoft Word	Other:	
Calculator	Microsoft Excel		
Computer	Microsoft PowerPoint		
Fax	Quickbooks / Quicken		
Scanner / Copier			

### **EMPLOYMENT EXPERIENCE**

Start with your present, or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender or national origin, disabilities, or other protected status.

Employer:		Job Title:	Supervisor:	
Address:		_	Phone:	
Dates Employed	: То:	_	From:	
Hourly Rate / Salary	: Starting:		Final:	
lob Duties:				
Reason for Leaving:				
Neason for Leaving.				
Reason for Leaving.				
			Supervisory	
Employer:		_Job Title:	Supervisor:	
Employer:		Job Title:	Phone:	
Employer: Address: Dates Employed		Job Title:	Phone: From:	
Employer: Address:		Job Title:	Phone:	

Employer:	:		Job Title:	Supervisor:	
Address:			-	Phone:	
	Dates Employed:	То:		From:	
н	ourly Rate / Salary:	Starting:		Final:	
Job Duties	5:				
Reason fo	r Leaving:				

Employer:			Job Title:	Supervisor:	
Address:			_	Phone:	
	Dates Employed:	To:		From:	
Ho	ourly Rate / Salary:	Starting:		Final:	
Job Duties					
Reason for	Leaving:				

If you need additional space, please continue on a spearate sheet of paper

#### List professional, trade, business, or civic activities and offices held:

(You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status)

## **ADDITIONAL INFORMATION**

**Other Qualifications -** *Summarize special job-related skills and qualifications acquired from employment or other experience.* 

State any additional information you feel may be helpful to us in considering your application

References:		
Name:	Phone:	
Address:	Relationship:	
Name:	Phone:	
Address:	Relationship:	
Name:	Phone:	
Address:	Relationship:	

Note to Applicants: Do not answer this question unless you have been informed about the requirements of the job for which you are applying.				
Are you capable of performing in a resonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied?	□Yes	🗆 No		

#### **APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct, unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

**Background / Credit Check for Employment Authorization** - By signing below, I give authorization to Gogebic Range Bank to request a background / credit check for employment.

**Consumer Reports for Employment Authorization Report** - It is the intention of Gogebic Range Bank to obtain Consumer Reports as part of this application process. A consumer report can include information from a variety of sources including credit and background information. The information in your consumer reports may be used for decisions related to your employment. By signing below, I give authorization to Gogebic Range Bank to request Consumer Reports for employment purposes.

Signature

Date