

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First

\_\_\_\_\_  
MI

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date



## Employment Application

**Please read before filling out this application.** Choice Bank does not discriminate in hiring or employment on the basis of any categories protected by state or federal law. No question on this application is intended to secure information to be used for such discrimination. The application will be given every consideration, but its receipt does not imply that the applicant will be employed. Please answer every question.

### PERSONAL INFORMATION

\_\_\_\_\_  
Position You are Applying For

\_\_\_\_\_  
Social Security Number

(    )

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
How Long at Present Address?

No     Yes    Date: \_\_\_\_\_    Position: \_\_\_\_\_

\_\_\_\_\_  
Have you been previously employed by Choice Bank?

\_\_\_\_\_  
E-Mail Address

Full-Time     Part-Time

\_\_\_\_\_  
Check which option(s) you would consider

\_\_\_\_\_  
Wages Expected

\_\_\_\_\_  
Date you can start

How did you hear about this position?

Visited Choice Bank

Choice Bank Employee

Newspaper Advertisement

Employment Agency

Job Fair/Career Fair

Internet \_\_\_\_\_

School \_\_\_\_\_

Other \_\_\_\_\_

What hours are you available to work?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

### EDUCATION AND TRAINING

High School \_\_\_\_\_

Name

Location

Years Completed

Diploma

College or University \_\_\_\_\_

Name

Location

Years Completed

\_\_\_\_\_  
Course of Study

\_\_\_\_\_  
Degree

Are you currently attending school?  Yes     No

\_\_\_\_\_  
Anticipated Graduation Date

Are you planning to pursue further studies?  Yes     No

If Yes:  Day School     Night School

**WORK EXPERIENCE** – Start with most recent employer  
May we contact your present or previous employer(s)?  Yes  No

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Company	Type of Business	( ) Phone Number
Address		From: ___/___/___ To: ___/___/___ Employed (Month and Year)
Name and Title of Supervisor		<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Last Job Title and Describe Your Work:		Starting Salary:
		Ending Salary:
		Reason for seeking new employment:

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Company	Type of Business	( ) Phone Number
Address		From: ___/___/___ To: ___/___/___ Employed (Month and Year)
Name and Title of Supervisor		<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Last Job Title and Describe Your Work:		Starting Salary:
		Ending Salary:
		Reason for seeking new employment:

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Company	Type of Business	( ) Phone Number
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Name and Title of Supervisor		<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Last Job Title and Describe Your Work:		Starting Salary:
		Ending Salary:
		Reason for seeking new employment:

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**SKILLS AND QUALIFICATIONS**

Use the space below to describe the skills and aptitudes that you feel qualify you for this position. (This may include volunteer work, school activities, or other things you have been involved with.)

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## ADDITIONAL EMPLOYMENT-RELATED INFORMATION

List any relatives or friends working for this organization who referred you for this position:

Name	Relationship
_____	_____
_____	_____

Do you have the legal right to work in the United States?  Yes  No

Are you 18 years of age or older?  Yes  No

If needed, do you have the proper work permits?  Yes  No

Are you able to perform the job(s) for which you are applying with or without accommodations?  Yes  No  
If No, accommodations needed: \_\_\_\_\_

Have you ever been convicted of any crime, or are any charges pending, involving dishonesty, breach of trust or theft? (A conviction itself does not constitute an automatic bar to employment, and will be considered only insofar as it relates to fitness to perform the job in question.)  Yes  No

If Yes, please explain \_\_\_\_\_

For purposes of verifying past employment or school attended, please indicate if you have been known by a different name. \_\_\_\_\_

### List Previous Addresses for the Last Five Years

\_\_\_\_\_ From: \_\_\_/\_\_\_ To: \_\_\_/\_\_\_  
Street Address

\_\_\_\_\_ City State Zip

From: \_\_\_/\_\_\_ To: \_\_\_/\_\_\_

\_\_\_\_\_ Street Address

\_\_\_\_\_ City State Zip

### NOTICE TO ALL APPLICANTS

Are you familiar with the requirements of the job? If yes, please answer the following accommodation question. If you are not familiar with the requirements of this job, or are unsure, ask to review the job description before you answer and before you list accommodations.

Are you capable of performing the job for which you have applied?  YES  NO

Please list any accommodations requested: \_\_\_\_\_

**\* PLEASE READ CAREFULLY BEFORE SIGNING \***

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Choice Bank that such employment with Choice Bank is **at will**, for no specified duration and may be terminated by either Choice Bank or myself at any time, with or without cause or notice. **I understand that employment is at-will as defined by Wisconsin law.** I understand that none of these documents, policies, procedures, actions, or statements of Choice Bank or its representatives used during the employment process is deemed a contract of employment real or implied.

I understand that if offered a position with Choice Bank, I may be required to submit to a pre-employment background check and consumer credit report as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment checks will result in withdrawal of any employment offer or termination of employment if already employed.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE STATEMENTS.

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Applicant's Signature

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Date