



Application for Employment

Thank you for your interest in employment with Bank Forward. The following information is requested to help us make the best possible placement of employees within our organization. We consider applicants for all positions without regard to race, color, religion, national origin, sex, age or any other legally protected status. No question on this form is intended to secure information to be used for such discrimination. Bank Forward is an Equal Opportunity Employer of women, minorities, protected veterans and individuals with disabilities. We will ensure that applicants with disabilities are provided reasonable accommodations for the hiring process.

DATE _____

NAME _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP CODE

TELEPHONE: (____) _____ E-MAIL: _____

BEST TIME TO CONTACT YOU AT HOME: _____ AM/PM

BANK LOCATION APPLYING FOR: _____

POSITION APPLYING FOR: _____

ON WHAT DATE WOULD YOU BE AVAILABLE TO WORK? _____

ARE YOU APPLYING FOR ___FULLTIME OR ___PARTTIME WORK?

HOURLY RATE OF PAY OR MONTHLY SALARY EXPECTED? _____

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE UNITED STATES? ___YES ___NO
(Proof of eligibility will be required upon employment)

HAVE YOU EVER APPLIED AT OR BEEN EMPLOYED BY OUR BANK? ___YES ___NO
IF YES, WHEN? _____

SCHOOL	NAME CITY/STATE	COURSE OF STUDY	DID YOU GRADUATE?	DEGREE/ DIPLOMA
HIGH SCHOOL				
COLLEGE OR UNIVERSITY				
GRADUATE SCHOOL				
BUSINESS OR VOCATIONAL				
OTHER (SPECIFY)				

LIST ANY SPECIALIZED TRAINING, TECHNICAL SKILLS, JOB RELATED SKILLS, CERTIFICATES OR LICENSES RELATING TO THE POSITION YOU ARE APPLYING FOR.

LIST PROFESSIONAL, TRADE BUSINESS OR CIVIC ACTIVITIES AND OFFICES HELD. (You may exclude memberships which would reveal sex, race, religion, national origin, age, sexual orientation, disability, political persuasion or other protected status):

STARTING WITH YOUR PRESENT OR LAST JOB, LIST ALL PERIODS OF EMPLOYMENT AND UNEMPLOYMENT FOR THE PAST TEN YEARS. INCLUDE ANY JOB RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES. (Use an additional sheet of paper if necessary.)

1	Employer		Dates Employed		Work Performed
			Start	End	
	Address				
	Telephone Number(s)		Hourly Rate/Salary (Optional)		
			Starting	Final	
	Job Title	Supervisor			
Reason for Leaving	Voluntary or Involuntary	May we Contact? Y/N			
2	Employer		Dates Employed		Work Performed
			Start	End	
	Address				
	Telephone Number(s)		Hourly Rate/Salary (Optional)		
			Starting	Final	
	Job Title	Supervisor			
Reason for Leaving	Voluntary or Involuntary	May we Contact? Y/N			
3	Employer		Dates Employed		Work Performed
			Start	End	
	Address				
	Telephone Number(s)		Hourly Rate/Salary (Optional)		
			Starting	Final	
	Job Title	Supervisor			
Reason for Leaving	Voluntary or Involuntary	May we Contact? Y/N			

NAME TWO ADDITIONAL INDIVIDUALS (NOT RELATIVES OR PREVIOUS EMPLOYERS) WHO KNOW YOUR JOB-RELATED STRENGTHS AND WEAKNESSES.

Name _____ Company _____ Title _____ Phone Number _____

Name _____ Company _____ Title _____ Phone Number _____

As a financial institution, Bank Forward has specific policies regarding employee and applicant honesty, performance, conduct and attendance. Additionally, Bank Forward reserves the right to investigate any unethical or illegal activities including, but not limited to, misappropriation of funds, misuse of bank accounts, falsification of records, the use or possession of controlled substances while working or working under the influence of controlled substances, unexcused absences, and the like. According to our policies, involvement in such activities will result in disciplinary actions which could include termination. In some cases, Bank Forward will refer an employees conduct to the State or Federal government for prosecution.

Please read and initial each paragraph below. If there is any part of the page you do not understand, please discuss them with a Human Resources representative before signing.

_____ I certify that answers given herein are accurate and complete to the best of my knowledge. I have not knowingly falsified or withheld any facts or circumstances that, if disclosed, would adversely affect my application for, or employment with Bank Forward. I understand that any such falsification or withholding, no matter when it is discovered, is ground for my application to be rejected or my immediate termination if employed.

_____ I hereby authorize Bank Forward to thoroughly investigate my background for the purpose of evaluating my qualifications for employment. They may request information from: former employers (unless otherwise noted), educational institutions, business and professional organizations, credit bureaus, local, state and federal law enforcement agencies, individuals with whom I have been associated, and with any others who may have information regarding my competence, character or qualifications, and any and all other sources considered appropriate by Bank Forward.

_____ I hereby release Bank Forward from any liability for their action in investigating, considering and evaluating my competency, character and qualifications, and I further release from any liability all individuals and organizations who provide information concerning my competence, character, qualifications, and other applicable background information for employment with Bank Forward.

_____ I understand that neither this document nor any offer of employment from the employer is intended to imply or create an employment contract unless a specific document to that effect is executed by the employer and employee in writing. I further understand that, if hired, my employment is at will and I can be terminated at any time, with or without cause or notice for any reason. I also understand, if hired, I can terminate my employment at any time and for any reason.

_____ The Federal Deposit Insurance Act (12 USC 1829) provides that no person may be considered for a position with Bank Forward who has been convicted of any criminal offense involving dishonesty, breach of trust, or money laundering without the prior written approval of the Federal Deposit Insurance Corporation.

_____ If employed, I understand that I will be bound by the Bank Forward Code of Ethics, personnel policies and all practices which govern Bank Forward employees.

_____ If employed, I understand that payroll payment will be made to my specified account by direct deposit.

I have read, understand and agree with the above information.

Applicant Signature

Date