

Employment Application Form

PLEASE COMPLETE PAGES 1-3.

DATE _____

Name _____
Last First Middle

Present address _____
Number Street City State Zip

How long at current address _____ Social Security No. _____ - _____ - _____

Telephone () _____

Are you under age 18 ___ YES ___ NO, if "YES", can you provide proof of your eligibility to work? ___ YES ___ NO

Are you currently authorized to work in the United States? ___ YES ___ NO. Proof of eligibility will be required if hired.

Position applied for (1) _____
 and wage desired (2) _____
 (Be specific)

Days/hours available to work
 No Pref _____ Thur _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____ Sun _____

How many hours can you work weekly? _____

Employment desired FULL-TIME ONLY PART-TIME ONLY TEMPORARY/CONTRACT

When are you available to start work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

Have you ever been convicted of a crime? No Yes (A Conviction record will not necessarily disqualify you from employment.)

Employee Referral? Name _____

UNDER MARYLAND LAW AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, OR PROSPECTIVE EMPLOYMENT OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A POLYGRAPH, LIE DETECTOR OR SIMILAR TEST OR EXAMINATION AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT.

APPLICATION FOR EMPLOYMENT

MILITARY	
HAVE YOU EVER BEEN IN THE ARMED FORCES?	<input type="checkbox"/> Yes <input type="checkbox"/> No
ARE YOU NOW A MEMBER in the ARMED FORCES?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specialty _____	Date Entered _____ Discharge Date _____

Work Experience Please list your work experience for the beginning with your most recent job held.
 If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
Your last job title			
Reason for leaving (be specific)			
Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
Your Last Job Title			
Reason for leaving (be specific)			
Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
Your last job title			
Reason for leaving (be specific)			
Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
Your last job title			
Reason for leaving (be specific)			

May we contact your present employer? Yes No

Did you complete this application yourself Yes No If not, who did? _____

After reviewing the attached job description, please indicate if you are able to perform the essential functions of the job for which you have applied, with or without a reasonable accommodation Yes _____ No.

PLEASE READ CAREFULLY

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

We are an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age, height, weight, or disability. We assure you that your opportunity for employment with us depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

Applicant Signature

Print

Date

Employee Background Check Authorization

Applicant Name & Contact Information: _____ () _____ - _____ PLEASE PRINT

APPLICANT DATA: Courts and other entities require the following information for identification when checking public records. It is confidential and used for identification only.

LEGAL NAME as shown on the applicant's Social Security Card (Required)			Social Security Number
Last	First	Middle	
FORMER NAMES any other names used (Required)			DATE OF NAME CHANGE
Last	First	Middle	
FORMER NAMES any other names used (Required)			DATE OF NAME CHANGE
Last	First	Middle	
NAME as it appears on driver's license (Required)			LICENSE OR ID NUMBER State of Issue:
Last	First	Middle	
POSITION HELD Title		Department	DATE OF BIRTH

APPLICANT RESIDENCE HISTORY: Provide Addresses for the past 7 years, with current address first (include PO BOX, APT. #, etc, then list former addresses)

Street	City	State	Zip Code	Years

DISCLOSURE, AUTHORIZATION AND CONSENT

I hereby consent and authorize GoodHire to prepare, on the employer's behalf, a report as defined above for employment purposes before employment or anytime after employment. All inquiries are limited to information that affects job performance and the workplace. It is conducted in accordance with applicable federal and state laws including the Fair Credit Reporting Act (FCRA). The screening will be conducted by an outside agency – GoodHire. As a result, Heritage USA Federal Credit Union may obtain a Consumer Report and/or an Investigative Consumer report on you as an applicant or during employment.

1. **Consumer Report:** A Consumer Report consists of information deemed to have a bearing on job performance, and may include information from public and private sources, public records, former employers and references. The scope of the report may include information concerning your driving record, civil and criminal court records, credit, worker's compensation record, education, credentials, identity, past addresses, social security number, previous employment and personal references.

2. **Investigative Consumer Report:** A Consumer Report may also include reference checks from former employers or references provided by the employee. Any reference check is strictly limited to job related information. These are known as an "investigative consumer report." This type of report is legally defined as a report based upon interviews that may contain information relating to your character, general reputation, personal characteristics or mode of living. You have the right to request additional disclosures of the nature and scope of the investigation and a statement of your rights. To receive this information or to inspect any files concerning such a report, you may contact Heritage USA Federal Credit Union or GoodHire at 888.906.4284, or at P.O. Box 391146, Omaha, NE 68139

3. **Notice to Applicants:** Under the Fair Credit Reporting Act, should an employer rely upon a consumer report for an adverse action, before taking that action you will be provided with a copy of the consumer report and a summary of your rights.

I hereby consent and authorize Heritage USA Federal Credit Union and/or GoodHire on the employer's behalf, to prepare a report as defined above for employment purposes before employment or anytime after employment. I authorize and release individuals, companies, references, current and former employers, schools, credit bureaus, municipal, county, state and federal agencies and courts, to provide all information that is requested to the employer or GoodHire. I also agree that the report may be released to the employer where I perform my work. I agree that a copy or fax of this document shall be valid as an original and I certify that the facts and information on the form and in my resume and/or application are true and correct.

NAME	SIGNATURE	DATE
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