



# APPLICATION FOR EMPLOYMENT

**NOTICE TO APPLICANTS**  
 Screening tests for illegal drug use will be required as a condition of employment.  
**We are proud to be a DRUG-FREE workplace.**

OUR CREDIT UNION IS AN EQUAL OPPORTUNITY EMPLOYER. WE DO NOT DISCRIMINATE IN HIRING BECAUSE OF AGE, RACE, CREED, COLOR, NATIONAL ORIGIN, SEX OR HANDICAPS.

					Date		
Name	Last	First	Middle Initial	Social Security Number	Driver's License Number		
Email Address		Provide names under which you have worked			Home Phone (Area Code)		
Present Address	No. & Street	City	State	Zip Code	Business or Message Phone		
Type of Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal							
Type of Position Desired				Credit Union Location Desired			
Salary Desired				Date Available for Work			
Have you ever been employed by Suncoast Schools Federal Credit Union? If yes, list all positions held, locations worked, dates of position held, Manager's name and reason for leaving.							
Have you completed an application for employment with this organization before? If yes give dates and the name you used.							
Who referred you to Suncoast Schools Federal Credit Union? List name & relationship if applicable.							
In case of emergency, notify:					Bus. Phone		
Name		Address		Home Phone			
Are you able to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No List languages you can speak fluently:							
Are you able to travel to other Credit Union locations? <input type="checkbox"/> Yes <input type="checkbox"/> No							
If you are not a citizen of the United States, under what type of permit do you have the legal right to work in the United States?							
Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe the type of crime, date of conviction and penalty imposed.							
Have you ever been named as a defendant in a civil action for an intentional tort (wrongful act, such as assault, battery, domestic violence, intentional infliction of emotional distress or other torts)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe the nature of the tort (wrongful act) and the disposition of the action.							
[Answering "yes" to these questions does not constitute an automatic bar of employment. Factors such as date of the conviction or incident, seriousness and nature of the violation or act, rehabilitation and position applied for will be taken into account.]							
List names of educational institutions you attended:		Location		Dates Attended		Certificate, Diploma, Degree or Credits	Grade Point Average
				From	To		
High School							
College							
Graduate School							
Other Education or Training							
What business machines (office products) do you operate?							
Indicate which of the following computer skills you are proficient in: <input type="checkbox"/> Windows _____ (version) <input type="checkbox"/> Microsoft Office <input type="checkbox"/> Excel <input type="checkbox"/> Power Point <input type="checkbox"/> Other _____							
List your other experiences, knowledge, skill or talents which you feel qualifies you to work for Suncoast Schools Federal Credit Union?							

NOTE: If submitting Resumé, it is necessary that an Application be completed in full to accompany it.

## WORK HISTORY

"Do not leave any gaps" in employment (Record U. S. Military Service as a Position)

a. Employer's Name (Begin with Most Recent) b. Address c. City and State d. Phone Number	Kind of Business	Time Employed				Nature of Work and Job Title	Starting Salary	Salary at Leaving	Reason for Leaving	Name of Immediate Supervisor
		From		To						
		Mo.	Yr.	Mo.	Yr.					
1. a. _____ b. _____ c. _____ d. _____									Name  Title	
2. a. _____ b. _____ c. _____ d. _____									Name  Title	
3. a. _____ b. _____ c. _____ d. _____									Name  Title	
4. a. _____ b. _____ c. _____ d. _____									Name  Title	

Have you ever been terminated or asked to leave any job? If so, please explain:

Indicate by employee number (1-4) which employer you do not want us to contact and why:

Summarize your relevant experiences and explain periods of unemployment or periods not accounted for above. Use a separate sheet of paper if needed.

PERSONAL REFERENCES	Address (include City and State)	Phone number
1.		
2.		
3.		

### APPLICANT STATEMENT:

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, law enforcement, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in the application, or in a resume or job interview. I hereby waive and release any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process; and all other persons, corporations or organizations for furnishing such information about me.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and agree that the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice. I agree that nothing in this application, or conveyed to me during any interview, is intended to create an employment contract. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by an authorized representative of the company.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

### DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## **FAIR CREDIT REPORTING ACT DISCLOSURE**

SSFCU may obtain and use a consumer report or an investigative consumer report from an external consumer reporting agency for employment purposes, either now or in the future. These purposes may include but are not limited to:

- Considering your application for employment;
- Making a decision whether to offer you employment with the company;
- Deciding whether to continue your employment (if you are hired by the company);
- Doing periodic re-screening of current employees, and/or;
- Making any other employment decisions affecting you.

A consumer reporting agency is a person or business that regularly assembles or evaluates consumer credit information or other information on consumers. As an applicant or an employee, you are considered a “consumer” under the Fair Credit Reporting Act.

A consumer report may include information about your character, general reputation, personal characteristics, or mode of living, which is used or collected for employment purposes. An investigative consumer report also involves personal interviews with sources such as employers, educators, etc.

You have a right to request disclosures of the nature and scope of any investigative consumer report that the company obtains about you. You also have other rights under the Fair Credit Reporting Act, a summary of which has been given to you. You can access this summary directly at: [www.ftc.gov/os/statutes/2summary.htm](http://www.ftc.gov/os/statutes/2summary.htm).

## **ACKNOWLEDGMENT AND AUTHORIZATION**

I hereby authorize SSFCU to obtain consumer reports and investigative consumer reports about me from any consumer reporting agency now or at any other time during my employment. I further consent to any consumer reporting agency providing such reports to SSFCU, and I agree that SSFCU may consider information in consumer reports and investigative consumer reports when making decisions regarding any aspect of my application for employment and/or continued employment with SSFCU including periodic re-screening of current employees. I also acknowledge receipt of the Federal Trade Commission’s prescribed Summary of Consumer Rights.

Signature

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Please Print Full Legal Name

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Date \_\_\_\_\_