



Farmers State Bank
People First Banking

Employment Application Form

DATE _____

Name _____
Last First Middle

Present address _____
Number Street City State Zip

If you have resided at your present address fewer than three years, please list your prior address:

Prior address _____
Number Street City State Zip

Telephone (_____) _____

Email address: _____

Position applied for: _____

Days/hours available to work:

Wage desired: _____

No Pref _____ Thur _____

How many hours can you work weekly? _____

Mon _____ Fri _____

Employment desired:

Tue _____ Sat _____

FULL-TIME PART-TIME TEMPORARY/SEASONAL

Wed _____ Sun _____

When are you available to start work? _____

How did you learn of this employment opportunity? _____

Have you ever been employed here before? YES NO If so, give date(s) _____

Do you have any relatives or friends employed here? YES NO If yes, please list name and relationship: _____

TYPE OF SCHOOL	NAME OF SCHOOL – CITY, STATE	NUMBER OF YEARS COMPLETED	GRAD?	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

APPLICATION FOR EMPLOYMENT

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 _____ Your last job title _____ Immediate Supervisor _____	Employment dates From: _____ To: _____	Kind of Work Performed:
	Pay or salary Starting: _____ Final: _____	Reason for leaving:
	<input type="checkbox"/> Involuntary Resignation <input type="checkbox"/> Voluntary Resignation <input type="checkbox"/> Discharged Other: _____	
Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____ Your last job title _____ Immediate Supervisor _____	Employment dates From: _____ To: _____	Kind of Work Performed:
	Pay or salary Starting: _____ Final: _____	Reason for leaving:
	<input type="checkbox"/> Involuntary Resignation <input type="checkbox"/> Voluntary Resignation <input type="checkbox"/> Discharged Other: _____	
Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____ Your last job title _____ Immediate Supervisor _____	Employment dates From: _____ To: _____	Kind of Work Performed:
	Pay or salary Starting: _____ Final: _____	Reason for leaving:
	<input type="checkbox"/> Involuntary Resignation <input type="checkbox"/> Voluntary Resignation <input type="checkbox"/> Discharged Other: _____	
Name of employer _____ Address _____ City, State, Zip Code _____ Phone number _____ Your last job title _____ Immediate Supervisor _____	Employment dates From: _____ To: _____	Kind of Work Performed:
	Pay or salary Starting: _____ Final: _____	Reason for leaving:
	<input type="checkbox"/> Involuntary Resignation <input type="checkbox"/> Voluntary Resignation <input type="checkbox"/> Discharged Other: _____	

May we contact the employers listed above? Yes No If no, indicate which one(s) you do NOT wish us to contact and the reason why you prefer we do not contact the employer(s).

Have you ever been permitted to resign rather than be discharged or asked to resign for any position? Yes No
If yes, please state the employer(s) and the reason for the discharge or resignation.

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

Have you ever been arrested for or convicted of a crime that has not been expunged by court? Yes No

Why did you apply for a position at Farmers State Bank? _____

What is the main reason you would be a valuable employee? _____

Identify any special job-related skills or qualifications acquired from education, employment, volunteer work or military service.

Identify specific skills related to technology, communications, customer service, or cash handling that will be helpful in performing the responsibilities of the position you are applying:

Identify the previous job(s) you liked best and describe why: _____

Identify the previous job(s) you liked least and describe why: _____

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.

PERSONAL REFERENCES

List two references who are **not** related to you and are **not** previous employers.

1. _____
Name Telephone Relationship How long known?

2. _____
Name Telephone Relationship How long known?

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.

Farmers State Bank is 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