



Employment Application

ATTN: HR Manager
P. O. Box 492395
Redding, CA 96049-2395

Members 1st Credit Union is an equal opportunity employer and selects employees on the basis of qualifications. We consider all applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, disability, or any other legally protected status.

Personal Information

Name: _____
Last First Middle

Contact Address: _____
Street City State Zip Code

Contact Telephone: _____ E-Mail Address: _____

Position Applied For: _____

Date Available: _____

Previously Employed by Members 1st? Yes ___ No ___ If so, when? _____

Type of Employment: Part Time ___ Full Time ___

Referred to Members 1st Credit Union by: _____

Have you ever had fidelity bond coverage denied, modified, or cancelled? Yes ___ No ___
If Yes, please explain. _____

Have You Ever Applied to Members 1st Credit Union? Yes ___ No ___ If so, when? _____

Hours Available					
	Monday	Tuesday	Wednesday	Thursday	Friday
From:					
To:					

Employees hired to work part-time are also hired with the understanding that they are on-call to work additional hours as needed. Also to meet staffing needs, you may be required to report to a different branch or department.

Can you work additional hours upon request? Yes ___ No ___

Education & Training: (Please indicate your education or other background information which is relevant to the job which you are applying for.)

List Other Skills and Experience:

Employment History

Please list your work experience beginning with your present or most recent job hired. If you were self-employed, give company name.

Employer

Company: _____ Job Title: _____

From: _____ To: _____

Job Duties: _____

Reason for Leaving: _____

Address: _____
Street City State Zip Code

Phone: _____ Supervisor: _____

***Copy this page if you have more than three employers to list.**

Employer

Company: _____ Job Title: _____

From: _____ To: _____

Job Duties: _____

Reason for Leaving: _____

Address: _____
Street City State Zip Code

Phone: _____ Supervisor: _____

Employer

Company: _____ Job Title: _____

From: _____ To: _____

Job Duties: _____

Reason for Leaving: _____

Address: _____
Street City State Zip Code

Phone: _____ Supervisor: _____

References

Please list references other than supervisors or family. Example: current or past co-workers, peers, etc.

Reference 1

Name: _____

Address: _____
Street City State Zip Code

Telephone: _____ Occupation: _____ Years Known: _____

Reference 2

Name: _____

Address: _____
Street City State Zip Code

Telephone: _____ Occupation: _____ Years Known: _____

May we contact your present employer? ___ Yes ___ No

Additional Comments:

If you desire, you may use the space below to provide additional information about yourself and/or qualifications.

Certification:

My signature below certifies that all information in this application is correct and complete to the best of my knowledge and belief and that I understand that providing false, inaccurate, misleading, or incomplete information will result in refusal of employment or termination of employment if discovered after date of hire. I acknowledge that the company will verify the accuracy and completeness of the information I have provided and I authorize each employer, school, or person I have named to provide information regarding my employment, education, character, and qualifications, and release each employer, school or person from any and all liability for any damages that may result from furnishing information to the company. I understand that if I am employed, I must conform to the company's rules and regulations and that my employment may be terminated with or without cause at the option of either the company or myself.

***NOTE: Applications for employment are accepted when employment opportunities exist and such opportunities are published on our website or advertised by other means to the public. This application will be valid for a period not to exceed 60 days from the date signed by the applicant. Resumes may be attached to, but will not be accepted in lieu of this application form.**

Applicant's Signature

Date