

APPLICATION FOR EMPLOYMENT

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

PERSONAL INFORMATION

Date _____

NAME _____

Social Security # _____

Present Address _____

Permanent Address _____

Phone Number _____

Are you 18 Years or Older? Yes No

Are you prevented from lawfully becoming employed

In this country because of Visa or Immigration status? Yes No

EMPLOYMENT DESIRED

Position	Date you Can Start	Salary Desired

Are You Employed Now?	If so may we inquire Of your present employer?

Have you ever Applied with Parkway Credit Union before?	Where?	When?

Referred By: _____

EDUCATION	Name & Location of School	*No. of year Attended	*Did you Graduate?	Subject Studied
Grammer School				
High School				
College				
Trade, Business or Correspondence School				

GENERAL

Subject of Special Study or Research Work _____

Special Skills _____

Activities: (civic, athletic, etc.) _____

(Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color or nation of origin of its members)

U.S. Military or Naval Service

Rank _____

Present Membership in National Guard or Reserves

* This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EECC on July 26, 1991

FORMER EMPLOYERS (list below the last three employers, starting with the last one first)

Date Month & Year	Name & Address of Employer	Salary	Position	Reason For Leaving
From To				
From To				
From To				
From To				

Which of these jobs did you like best? _____

What did you like most about this job? _____

REFERENCES (give the names of three persons not related to you, whom you may have known at least one year)

Name	Address	Business	Years Acquainted

**In Case on an
Emergency Notify**

Name	Address	Phone Number

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice. At any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

Date _____ Signature _____

DO NOT WRITE BELOW THIS LINE

Interviewed By: _____ Date _____

Remarks: _____

Neatness: _____ Ability _____

Hired: Yes No _____ Position _____ Dept. _____

Salary/Wage _____ Date Reporting to Work _____