

Professional or Personal Development
courses: _____

Special Qualifications: (any additional strengths or skills that you feel would be an asset)

Employment History

Start with your current employer. Do not omit any employment period.

Attach an additional sheet if necessary.

Dates of Employment (Month, Year): Position Monthly Salary:

From: To:

Firm Name:

Type of Business:

Address (Number & Street):

City, State, Zip Code:

Phone Number:

Name under which you were employed (if different):

Name & Title of immediate
supervisor:

Responsibilities:

Reason for leaving:

If still employed, may we contact your present employer? Yes No

Dates of Employment (Month, Year): Position Monthly Salary:

From: To:

Firm Name:

Type of Business:

Address (Number & Street):

City, State, Zip Code:

Phone Number:

Name under which you were employed (if different):

Name & Title of immediate
supervisor:

Responsibilities:

Reason for leaving:

Dates of Employment (Month, Year): Position Monthly Salary:

From: To:

Firm Name:

Type of Business:

Address (Number & Street):

City, State, Zip Code:

Phone Number:

Name under which you were employed (if different):

Name & Title of immediate
supervisor:

Responsibilities:

Reason for leaving:

Dates of Employment (Month, Year):		Position	Monthly Salary:
From:	To:		
Firm Name:		Type of Business:	
Address (Number & Street):		City, State, Zip Code:	Phone Number:
Name under which you were employed (if different):		Name & Title of immediate supervisor:	
Responsibilities:			
Reason for leaving:			

References

Name:		Title:
Company:		
Address (Number & Street):	City, State, Zip Code:	Phone Number:
Name:		Title:
Company:		
Address (Number & Street):	City, State, Zip Code:	Phone Number:
Name:		Title:
Company:		
Address (Number & Street):	City, State, Zip Code:	Phone Number:
Name:		Title:
Company:		
Address (Number & Street):	City, State, Zip Code:	Phone Number:

Additional Personal Data

Are you able to perform the essential function of the job for which you have applied with or without or without reasonable accommodation?
If no, please explain.

Have you been convicted of a felony within the past five years?
(An affirmative response will not automatically disqualify you from being a candidate for employment.)
If yes, please explain.

If you are under 18, do you have a work permit?

**Please Read
Carefully**

I certify that the statements indicated herein are true and correct to the best of my knowledge and I understand that falsification or omission of any information could result in termination of my employment.

I acknowledge the fact that this Application for Employment will be active for 30 days; after this time period, I must reapply for further consideration.

I also understand that I must complete an application for each position I am applying for.

This Application for Employment is not a contract and cannot create a contract. If employed by Valliance Bank, I agree to abide by its rules and regulations. I understand that my employment would be "at-will" and could be terminated at any time by either party, with or without cause and with or without notice.

This understanding supersedes all prior agreements and representations, and any subsequent understanding which affects this arrangement must be in writing and signed by the President of Valliance Bank

Signature _____		Date _____
For Human Resources Department Use Only		
Office Location	Salary	Hire Date
Department	Position	Grade/Pay Points and Job Code
Supervisor	HR Representative	Work Telephone Number

Educational Release Authorization

NOTE: This Release Authorization must include all institutions which you have attended after high school.

I hereby authorize the following institutions to release to Valliance Bank verification of my attendance at:

School:	City,	State	Graduation Date (If applicable)
Degree/Major:			I attended under the name of:
School:	City,	State	Graduation Date (If applicable)
Degree/Major:			I attended under the name of:
Signature:		Date:	
Social Security Number:			

Authorization

I authorize Valliance Bank to make whatever inquiries it may deem necessary in connection with my application for employment. As part of such inquiries, has my permission to contact persons who may have information relating to my suitability for employment.

I authorize and instruct any person or agency contacted to participate or conduct inquiries at its request to compile information, and to furnish any information obtained as a result of such inquiries.

I further authorize Valliance Bank in its sole discretion, to furnish copies of this authorization and my application to any person(s) in connection with the above purposes.

Disclosure Statement

Information contained in reports obtained by Valliance Bank in accordance with the above authorization may include information pertaining to your character, general reputation, police records, and personal characteristics. You have the right to request that Valliance Bank completely and accurately disclose to you the nature and scope of all investigations requested. Such a request must be made in writing to the personnel department within a reasonable period of time after your application for employment is received.

I hereby acknowledge that I have read the above and have understood it.

Date

Signature

Social Security Number