

APPLICATION FOR EMPLOYMENT



Citizens State Bank is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability, or any other characteristic protected by law.

Personal Information

Name (Last, MI, First)			Social Security No.
Present Address	Apt. No.	City	State/Zip
Permanent Address (If Different Than Present Address)	Apt. No.	City	State/Zip
Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Primary Phone		E-mail Address

Desired Employment

Position	Date you can start	Salary desired
Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, may we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Ever applied with this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?
Ever worked for this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?
Reason for leaving		
Name of last supervisor at this company		
Who referred you to this company? <input type="checkbox"/> Facebook / LinkedIn <input type="checkbox"/> Online Advertising - Indeed/Monster <input type="checkbox"/> Current Bank Employee:		
<input type="checkbox"/> Bank Website <input type="checkbox"/> College Job Website <input type="checkbox"/> Wow Card <input type="checkbox"/> Walk In / Other:		

Education

School Level	Name & Location of School	No. of Years	Degree	Subjects Studied
Grammar School				
High School				
College				
Trade, Business or Correspondence School				

General

Subjects of special study or research work
Special Training
Special Skills

Former Employers

List Below last three employers, starting with most recent

Name of present or last employer			
Address		City	State Zip
Starting Date	Leaving Date		Job Title
Weekly Starting Salary	Weekly Final Salary	May we contact your supervisor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of supervisor		Title	Phone
Description of work			
Reason for leaving			

Name of previous employer			
Address		City	State Zip
Starting Date	Leaving Date		Job Title
Weekly Starting Salary	Weekly Final Salary	May we contact your supervisor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of supervisor		Title	Phone
Description of work			
Reason for leaving			

Name of previous employer			
Address		City	State Zip
Starting Date	Leaving Date		Job Title
Weekly Starting Salary	Weekly Final Salary	May we contact your supervisor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name of supervisor		Title	Phone
Description of work			
Reason for leaving			

References

Below, give the names of three persons you are not related to, whom you have known at least one year.

Name	Phone #	Address	Business	Years Acquainted
1				
2				
3				

Hours of Availability

Mon	From:	To:	Thur	From:	To:
Tues	From:	To:	Fri	From:	To:
Wed	From:	To:	Sat	From:	To:

Other

Have you been convicted of, or pled guilty or no contest to, a crime other than a minor traffic violation? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain.

Authorization

I understand that my employment with Citizens State Bank (the Company) is at-will, meaning that I or the Company may terminate my employment at any time, or for any reason consistent with applicable state or federal law.

I authorize the Company to conduct a thorough background investigation of my work and personal history, and verify all data given on this application and during the interviews. I hereby release the Company, and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application. I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

Signature of Applicant

Date