



Equal Opportunity Employer

Application For Employment

This information is voluntarily provided and will be kept confidential. Refusal to provide it will not subject the applicant or employee to any adverse treatment and it will be used only in accordance with the Acts and Regulations.

(Please print in ink.)

NAME	Last	First	Middle	Date

Position Applied For _____

WHO REFERRED YOU TO AMERICA FIRST CREDIT UNION?

- Self
- Employment Agency
- Job Service
- College Placement
- Member
- Employee _____
(Name)
- Family Member
- Internet Posting
- Newspaper
- Other _____
(Specify)

PLEASE CHECK THE APPROPRIATE BOX:

- Caucasian
- Hispanic/Latino*white
- Hispanic/Latino*all other races
- Asian
- Pacific Islander*Native Hawaiian
- Black
- American Indian or Alaskan Native
- Declined Answer
- Male
- Female
- Disabled
- Vietnam Era Veteran
- Disabled Veteran
- _____ % Disability

(Please lift this tear sheet and complete the remainder of the application.)



Ogden Area
1344 West 4675 South
Riverdale, Utah 84405
Ogden 801-827-8638
Fax 801-827-8447

Salt Lake Area
230 Towne Ridge
Parkway, Suite #300
Sandy, Utah 84070
SLC 801-215-3281
Fax 801-215-3283

APPLICATION FOR EMPLOYMENT
EQUAL OPPORTUNITY EMPLOYER

Referred by:

AFCU Employee

(PLEASE PRINT - BLACK OR BLUE PEN)

Date

Position(s) Applied For

NAME (LAST) (FIRST) (MIDDLE)

Present Street Address APT. #

City State Zip Code

Telephone () Previous Address

Cell Phone () E-mail Address

Social Security # (Used to review internal records to determine previous employment or application for employment)

Were you previously employed by us? If yes, when?

If employed by us previously under a different name, what was that name?

Are you related to any employee or volunteer of this credit union?

If so, whom? Relationship

Table with 3 columns: Have you ever been bonded? (YES/NO), Employer with whom you were bonded, Has a loss ever been paid against your bond? (YES/NO)

Have you been convicted of a felony in the past seven years?

If yes, describe in full

Are you employed now? Yes No May we contact your present employer? Yes No

Are you available to work 40 hours 30 hours 20 hours 10 hours

Table with 6 columns: MON, TUE, WED, THUR, FRI, SAT. Row for 'What hours are you available?'

Can you travel if the job requires it? Yes No

Are you legally eligible for employment in the country? Yes No (Proof of U. S. citizenship or immigration status will be required upon employment.)

This company has a policy of employment based on merit, without discrimination because of age, race, color, religion, national origin, gender, veteran status, or disability.

THIS APPLICATION IS GOOD FOR 90 DAYS ONLY.

RECORD OF EDUCATION

	Name and Address of School	Course of Study	Circle Year Completed	Did you Graduate?	Diploma / Degree
High School			Soph.	<input type="checkbox"/> Yes	
			Jr.	<input type="checkbox"/> No	
			Senior	<input type="checkbox"/> No	
College			1 2 3 4	<input type="checkbox"/> Yes	
				<input type="checkbox"/> No	
				<input type="checkbox"/> No	
Other (Specify)			1 2 3 4	<input type="checkbox"/> Yes	
				<input type="checkbox"/> No	
				<input type="checkbox"/> No	

ADDITIONAL TRAINING OR EXPERIENCE

Check items in which you have training or experience:

- Cashiering
 MS Suite (Word,Excel,etc.)
 Typing/Speed _____ WPM
 Accounting
 Adding Machine, 10 Key
 Computer Training
 Customer Service
 Windows
 Foreign Language (Fluently) _____

Describe any other training and experience you may have that would help you in this job (be specific). _____

EMPLOYMENT EXPERIENCE

Start with your present job. Include all periods of employment or unemployment. Complete any section not included on your resume.

1	EMPLOYER	DATES EMPLOYED	WORK PERFORMED
	ADDRESS	FROM TO	
	JOB TITLE	HOURLY SALARY	
	SUPERVISOR	STARTING FINAL	
	REASON FOR LEAVING	PHONE #	
2	EMPLOYER	DATES EMPLOYED	WORK PERFORMED
	ADDRESS	FROM TO	
	JOB TITLE	HOURLY SALARY	
	SUPERVISOR	STARTING FINAL	
	REASON FOR LEAVING	PHONE #	
3	EMPLOYER	DATES EMPLOYED	WORK PERFORMED
	ADDRESS	FROM TO	
	JOB TITLE	HOURLY SALARY	
	SUPERVISOR	STARTING FINAL	
	REASON FOR LEAVING	PHONE #	
4	EMPLOYER	DATES EMPLOYED	WORK PERFORMED
	ADDRESS	FROM TO	
	JOB TITLE	HOURLY SALARY	
	SUPERVISOR	STARTING FINAL	
	REASON FOR LEAVING	PHONE #	

If you need additional space, please continue on a separate sheet of paper.

Have you ever been discharged or asked to resign? Yes No

If yes, explain _____

Why do you believe the Credit Union should hire you? _____

Are you looking for seasonal or regular employment? _____
 Are you interested in career work? _____ Date of Availability _____
 If now employed, why do you desire to make a change? _____
 Expected Salary \$ _____ Minimum Acceptable \$ _____

PERSONAL REFERENCES *(Not former Employers or Relatives)*

Name and Relationship	Address	Phone

APPLICANT PLEASE NOTE

1. It is agreed and understood that this application for employment in no way obligates America First Credit Union to employ me.
2. My employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either the Credit Union or myself. America First Credit Union personnel are not under contract of employment.
3. I agree, if hired, to furnish such additional information and complete such examinations as may be required to complete my employment file.
4. I hereby give permission to America First Credit Union to obtain my credit rating. My credit history is filed under the name of (if other than your name): _____
5. I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for not employing me or cause for my dismissal if I am employed.
6. I release from all liability and hold harmless America First Credit Union personnel and all persons, companies, or corporations supplying requested information on my past employment and background.
7. I understand that the Credit Union may require drug and/or alcohol testing, and I voluntarily consent to submit to such testing and examinations following an offer of employment. I understand that hired employees who refuse to participate in a drug and/or alcohol test, or those who fail or altercate a test are subject to disciplinary action up to and including termination.
8. I understand that America First Credit Union has a code of ethics for its employees and I will become fully aware of the code and abide by it and other company policies and procedures.
9. In the event the Credit Union advances me money or other items of value, or I otherwise become indebted financially to the Credit Union, I agree to repay the Credit Union and also that any wages due me may be offset by payroll deduction against any such monies due America First Credit Union.
10. I Acknowledge that at the time of termination, I will return all Credit Union property such as keys, badges, etc. to my Department Manager immediately.
11. I certify that the answers to the questions on this application are true and complete and that I have not knowingly withheld any information that would affect this application unfavorably.

Date _____ Signature _____



Background Check / Credit Report Authorization

I understand that America First Credit Union will utilize the services of a consumer reporting agency as part of the procedure for processing my application for employment.

I understand that the consumer reporting agency will conduct an investigation which may include obtaining information covering up to the last seven (7) years regarding my references, character, past employment, work habits, education, general reputation, personal characteristics, credit information, driving records and criminal background. I have provided my Social Security number to America First Credit Union to use for other business purposes.

I also consent to the use of this number for purposes of any such investigation and will deem it provided to America First Credit Union at this time, and for the purpose of, any and all employment investigations. Social Security #: _____

I understand that if employed by America First Credit Union they may obtain and use credit reports, from time to time, and make whatever inquiries it considers appropriate to evaluate me for any promotion, reassignment or retention as an employee.

I also understand that if I am denied employment based on information obtained in the report, I will be provided with a description in writing of my rights under the Fair Credit Reporting Act.

I hereby consent to this investigation and authorize America First Credit Union to obtain a report on my background as stated above from a consumer reporting agency.

Printed Name of Applicant

Signature of Applicant

Date

Members come first.