



**Application for Employment**  
YOU MUST FILL IN YOUR OWN APPLICATION

All applicable questions must be answered for this application to be considered. If an item does not apply, write "None". This application will be considered current for only 30 days from its date (below). To be considered after that time you must complete a new employment application.

**PERSONAL INFORMATION**

Date of Application \_\_\_\_\_

Social Security No. \_\_\_\_\_

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

Any Other  
Name Used: \_\_\_\_\_  
LAST FIRST MIDDLE

Current Address: \_\_\_\_\_ How long there? \_\_\_\_\_  
NO. & STREET CITY STATE

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Who referred you to the Company? \_\_\_\_\_

Do you have a legal right to work in the United States? ☐ Yes ☐ No Are you at least 18 years of age? ☐ Yes ☐ No

(Upon employment, you will be required to furnish written proof of legal authorization to work in the United States and photographic identification.)

If no, give age: \_\_\_\_\_  
(If hired, proof of status will be required.)

Have you ever committed or been convicted of a crime other than a minor traffic violation? ☐ Yes ☐ No

(Commission or conviction of a crime is not an automatic bar to employment. You need not disclose any crime whose records have been expunged. Surrounding circumstances of all criminal convictions will be considered.)

If so, give date(s) \_\_\_\_\_ Offense \_\_\_\_\_ Punishment or Outcome \_\_\_\_\_

Explanatory details \_\_\_\_\_

**EDUCATION**

CIRCLE YEARS ATTENDED		NAME & LOCATION OF SCHOOL	YEAR YOU LEFT	DID YOU GRADUATE?	
				YES	NO
Grade School	1 2 3 4 5 6 7 8	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
High School	1 2 3 4	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
College	1 2 3 4 5 6 7	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
Trade School	1 2 3 4	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Do you plan to attend school while working for the Company? ☐ Yes ☐ No If so, where? \_\_\_\_\_

Subject: \_\_\_\_\_

**ADDITIONAL TRAINING/SKILLS INFORMATION**

Special Certifications/Publications: \_\_\_\_\_

Skills and information relating to position applied for, or of general interest: \_\_\_\_\_

Describe hobbies, special interests, awards, and activities: \_\_\_\_\_

**U.S. MILITARY SERVICE**

Present Classification \_\_\_\_\_

Are you a member of National or State Guard or Active Reserve? ☐ Yes ☐ No

BRANCH	DATES		RANK WHEN ENTERING	RANK WHEN DISCHARGED
	FROM	TO		

Kind of training: \_\_\_\_\_

**JOB SOUGHT**Position applied for: \_\_\_\_\_ Wage or salary desired: \_\_\_\_\_ ☐ hrly ☐ wkly ☐ yrlyType of employment desired (check one) ☐ Full-time ☐ Part-time ☐ Temporary ☐ SummerAre you willing to work overtime? ☐ Yes ☐ NoAre you willing to work weekends? ☐ Yes ☐ NoAre you willing to travel? ☐ Yes ☐ No

Are there any times of the day, days of the week, or days during the year that you cannot work?

Times of the day \_\_\_\_\_ Days of the week \_\_\_\_\_ Days during the year \_\_\_\_\_

Date available to begin work \_\_\_\_\_ If hired, how will you get to work? \_\_\_\_\_

**EMPLOYMENT**Have you ever worked for this Company? ☐ Yes ☐ No If so, when? \_\_\_\_\_Have you ever previously applied to work for this Company? ☐ Yes ☐ No If so, when? \_\_\_\_\_Do you intend to work anywhere else in addition to working at this Company? ☐ Yes ☐ No

If so, where? \_\_\_\_\_

Are you presently employed? ☐ Yes ☐ No Name of Employer \_\_\_\_\_

Employer's Address \_\_\_\_\_

Why do you wish to change jobs? \_\_\_\_\_

**LIST ANY RELATIVES OR FRIENDS EMPLOYED BY THIS COMPANY**

NAME	RELATIONSHIP	WHERE (DEPARTMENT) EMPLOYED

**REFERENCES** --- Please list three business people, professionals, or other persons to whom you could turn for help.  
Do not list relatives, former employers, or employees of this Company.

1.	Name	How long known	Occupation	Telephone
Complete Address				
2.	Name	How long known	Occupation	Telephone
Complete Address				
3.	Name	How long known	Occupation	Telephone
Complete Address				

**WORK HISTORY** --- Please account for your time for at least the past ten years. Account for any time during this period that you were unemployed by stating the nature of your activities. Begin with present and work backwards. Please indicate if you were employed under another name. *If additional space is needed for the past ten years, attach a separate sheet and give the same information called for below.*

NAME OF PRESENT (OR MOST RECENT) EMPLOYER			
COMPLETE ADDRESS (STREET/CITY/ZIP)		TELEPHONE NO.	
NATURE OF YOUR WORK		AVERAGE WORK WEEK	
STARTING DATE	STARTING WAGES	LEAVING DATE	FINAL WAGES
NAME OF LAST SUPERVISOR			
GIVE DETAILS ON WHY YOU LEFT (OR PLAN TO LEAVE) THIS EMPLOYER			
GIVE REASON FOR AND LENGTH OF ANY INACTIVITY BETWEEN THIS JOB AND ONE BELOW (IF APPLICABLE)			

NAME OF SECOND TO LAST EMPLOYER			
COMPLETE ADDRESS (STREET/CITY/ZIP)		TELEPHONE NO.	
NATURE OF YOUR WORK		AVERAGE WORK WEEK	
STARTING DATE	STARTING WAGES	LEAVING DATE	FINAL WAGES
NAME OF LAST SUPERVISOR			
GIVE DETAILS ON WHY YOU LEFT THIS EMPLOYER			
GIVE REASON FOR AND LENGTH OF ANY INACTIVITY BETWEEN THIS JOB AND ONE BELOW (IF APPLICABLE)			

NAME OF THIRD TO LAST EMPLOYER			
COMPLETE ADDRESS (STREET/CITY/ZIP)		TELEPHONE NO.	
NATURE OF YOUR WORK		AVERAGE WORK WEEK	
STARTING DATE	STARTING WAGES	LEAVING DATE	FINAL WAGES
NAME OF LAST SUPERVISOR			
GIVE DETAILS ON WHY YOU LEFT THIS EMPLOYER			
GIVE REASON FOR AND LENGTH OF ANY INACTIVITY BETWEEN THIS JOB AND ONE BELOW (IF APPLICABLE)			

NAME OF FOURTH TO LAST EMPLOYER			
COMPLETE ADDRESS (STREET/CITY/ZIP)		TELEPHONE NO.	
NATURE OF YOUR WORK		AVERAGE WORK WEEK	
STARTING DATE	STARTING WAGES	LEAVING DATE	FINAL WAGES
NAME OF LAST SUPERVISOR			
GIVE DETAILS ON WHY YOU LEFT THIS EMPLOYER			

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PLEASE GIVE ANY ADDITIONAL INFORMATION YOU FEEL MAY HELP US IN CONSIDERING THIS APPLICATION

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**AGREEMENT** (Read Carefully)

I, the undersigned, agree to the following: (1) That all information supplied in this application and any attached resume is true and correct and that any false or misleading information furnished by me regarding my application will be sufficient cause for rejection of this application or immediate dismissal if employed by the Company; (2) That, if such is required, I will take a drug/alcohol screen test during the application process after a conditional offer of employment, if one is made, or during employment, if hired, and will permit the results of any drug/alcohol screen or physical examination to be released to the Company and to release all persons and companies from any liability arising out of such examination or testing; (3) That during my employment with the Company, if hired, I will report to the Company any drug-related criminal conviction, within five days of that conviction; (4) That if hired, I agree to abide by and observe all Company rules and regulations and agree that my employment is at-will and can be terminated with or without cause and with or without notice at any time at either the option of the Company or the employee and that those terms can only be modified by the President of the Company, in writing, provided that such writing specifically acknowledges that it is a modification of this agreement and is signed by the President; (5) That no supervisor, agent, representative, or employee of the Company has now or has had in the past any authority to enter into any agreement or employment for a specified period of time, or to make any agreement which is contrary to or a modification of the above terms, nor can any policies of the Company, either written or oral, modify the above terms; (6) That if hired, I may be on a ninety (90) day introductory period during which time I may be discharged without recourse; and (7) That the use of this application form does not indicate that there are any positions open and does not in any way obligate the Company or its associated Companies.

**RELEASE** (Read Carefully)

I, the undersigned, authorize all educational institutions which I have attended, all branches of U.S. military service in which I have served, all of my former and present employers, all credit bureaus, all court systems, and all of the representatives of those organizations to furnish to American Bank or its subsidiaries, associated companies, or representatives any and all information concerning my education, military service, former employment, credit history, and/or criminal convictions. In addition, I hereby agree to hold harmless and to release all of said organizations, institutions, services, employers, bureaus, courts, and representatives from any and all claims that I may have, or which may arise, against any and/or all of them, including the American Bank, its subsidiaries, associated companies, and representatives as a result of their furnishing information the American Bank, its subsidiaries, associated companies, or representatives.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

***American Bank is an Equal Opportunity Employer.***

***All applications are considered for employment without regard to race, color, sex, sexual orientation, gender, gender identity, marital status, age, religion, national origin, Veteran's status, disability that can be accommodated without undue hardship, genetics, or any other legally protected activity or characteristic.***