

☐ Yes

Application for Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resource Department. Position(s) applied for: Date of Application: Referral Source: ☐ Employee Advertisement ☐ Relative ☐ Walk-in ☐ Government Employment Agency Private Employment Agency Other Name of Source (if applicable) Name: First Middle Address: City Street State Zip E-Mail Address Telephone Number: Cell Phone Number: If necessary, best time to call you at home is: □ pm May we contact you at work? ☐ Yes □No If yes, work number and best time to call: ☐ pm If you are under 18 and it is required, can you furnish a work permit? If no, please explain: Have you submitted an application here before? ☐ Yes ☐ No If yes, give dates: Do any of your relatives of friends work at First Imperial? ☐ Yes □ No If yes, who: ☐ Yes Are you legally eligible for employment in this country? □ No If hired, do you have reliable transportation to and from work? Yes Date available for work: What is your desired rate of pay? Type of employment desired: Full-time Part-time ☐ Educational Co-Op ☐ Temporary ☐ Seasonal Will you relocate if job requires it? Yes □No Will you travel if job requires it? ☐ Yes □No Are you able to meet the attendance requirements of the position? Will you work over time if required? ☐ Yes ☐ No

Have you ever had a bond coverage modified, revoked or have you been declined for a bond?

Have you ever been convicted of a crime Omit misdemeanor marijuana convictions over two dismissed minor traffic violations.	e? Yes No o years old, misdemeanor convicti	ons where probation has been so	erved or discharged and the case		
If yes, please provide date(s) and details Answering yes to these questions does not constitute violation, rehabilitation and position applied for	tute an automatic bar to employme	ent. Factors such as date of the o	offense, seriousness and nature of		
Driver's license number, if driving is an example the following information of your past and reveal race, color, religion, sex, national origin, citi protected status), starting with the most recent (us	current employers, assignments of izenship, age, mental or physical of	or volunteer activities (exclude the disabilities, veteran/reserve natio	ose volunteer activities that would nal guard or any other similarly		
Employer	Phone number:	Dates employed:			
Address		From	To		
Starting job title/ Final job title					
Immediate supervisor and title		Summarize the type	Summarize the type of work performed:		
Reason for leaving					
May we contact for reference? Yes					
Employer	Phone number:				
Address		From	To		
Starting job title/ Final job title					
Immediate supervisor and title		Summarize the type of work performed:			
Reason for leaving					
May we contact for reference?	☐ No ☐ Later				
Employer Phone number:		Dates employed:			
Address		From	To		
Starting job title/ Final job title					
Immediate supervisor and title		Summarize the type	e of work performed:		
Reason for leaving					
May we contact for reference? ☐ Yes					
Employer	Phone number:	Dates employed:			
Address		From	To		
Starting job title/ Final job title					
Immediate supervisor and title			e of work performed:		
May we contact for reference? ☐ Yes					

Comments (including explanation of any gaps in employment)						
Skills and Qualificat Summarize any special training, in the position for which you are a	skills, licenses and/or c	ertificates that may q	ualify you as beir	ng able to perform jo	bb-related functions	
Educational Backgr A. List last three (3) school Indicate degree or diploma Minor field of study (if appli	ls attended, starting earned, if any. D . (g with most recent				
A. School	Completed	C. Degree	D. GPA	E. Major	F. Minor	
References List name and telephone num supervisors. If not applicable,		ersonal references		lated to you.	e <i>not</i> previous er of years know	
Additional Information Volunteer activities (exclude to citizenship, age, mental or ph	hose volunteer activi					
List special accomplishments religion, sex, national origin, o other similarly protected statu	citizenship, age, ment					

List any additional information you would like u	s to consider.
Applicant Statement	
I certify that all information I have provided in order correct.	to apply for and secure work with the employer is true, complete and
	nat is found to be false, incomplete or misrepresented in any respect, ration of this application, or (ii) discharge me from the employer's
information from all references (personal and profeseducational institutions and to otherwise verify the action or job interview. I hereby waive any and all rights are	oyer, its representatives, employees or agents to contact and obtain ssional), employers, public agencies, licensing authorities and accuracy of all information provided by me in this application, resumend claims I may have requiring the employer, its agents, employees guch information in the employment process and all other persons, information about me.
	discriminate in employment and no question on this application is blicant from consideration for employment on a basis prohibited by
	or only 30 days. At the conclusion of that time, if I have not heard or employment, it will be necessary to reapply and fill out a new
employer reserves the same right to terminate my end application does not constitute an agreement of lunderstand that no supervisor or representative of	t any time, for any or no reason and without prior notice, and the employment at any time, for any or no reason without prior notice. or contract for employment for a specified period or definite duration. If the employer is authorized to make any assurances to the contrary trary to the foregoing express language are valid unless they are in
I also understand that if I am hired, I will be required States and that federal immigration laws require me	d to provide proof of identity and legal authority to work in the United to complete an I-9 Form in this regard.
DO NOT SIGN UNTIL YOU HAVE READ THE ABOUT I certify that I have read, fully understand and accept	
Signature of applicant:	Date:
Credit Report Disclo	sure and Authorization Form
	ou are offered employment, at any time during your employment, edit report from Equifax for employment purposes concerning credit
Check here, if you would like to	receive a free copy of your credit report.
	rant to dispute the accuracy or completeness of any item in it, you address and telephone number are included in the report, and

request an investigation. (A summary of your rights under the Fair Credit Reporting Act is attached to this form.) If you disagree with the accuracy of any information in the report, you must notify First Imperial Credit Union within two days of the receipt of the report that you are challenging information in the report. First Imperial Credit Union will not make a final decision on your employment status until you have had a reasonable opportunity to address the information contained in the report.

Note that if you are denied employment or an adverse employment action is taken based on information obtained in the credit report, you will be notified and provided with a copy of the report as well as a written description of your rights under the Fair Credit Reporting Act.

Please read this form carefully before signing and dating it below, which will authorize First Imperial Credit Union to obtain a consumer credit report on you as part of the pre-employment background screening process or, if you are offered employment, for employment purposes at any time during your employment.

I consent to this investigation and hereby authorize First Imperial Credit Union to obtain a consumer credit report on my background for employment purposes only and acknowledge that I have been provided with a summary of my rights under the Fair Credit Reporting Act.						
Name:	Social Security Number:					
Signature:	Date:					
Date of Birth:						

A Summary of Your Rights Under the Fair Credit Reporting Act

The Federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you—such as if you pay your bills on time or have filed bankruptcy—to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA 15 U.S.C. 1681-1681u, at the Federal Trade Commission's web site (http://www.ftc.gov). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- · You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you—such as denying an application for credit, insurance, or employment—must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- · You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, and if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment with 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- · You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must

review your evidence and report its findings to the CRA. (The source also must advise national CRAs—to which it has provided the data—of any error). The CRA must give you a written report of the investigation, and a copy of your report if the instigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.

- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- You can dispute inaccurate items with the source of the information. If you tell anyone—such as a creditor who reports to a CRA—that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA

For questions or concerns regarding: CRAs, creditors and others not listed below contact: Federal Trade Commission, Consumer Response Center-FCRA, Washington, DC 20580 202-326-3761

National banks, federal branches/ agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name):

Office of the Controller of the Currency, Compliance Management Mail Stop 6-6, Washington, DC 20551 800-613-6743

Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks): Federal Reserve Board, Consumer & Community Affairs, Washington, DC 20551 202-452-3693

Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal Institution's name): Office of Thrift Supervision, Consumer Programs, Washington, DC 20552 800-842-6929

Federal credit unions (words "Federal Credit Union" appear in institution's name): National Credit Union Admin., 1775 Duke Street Alexandria, VA 22314

State-chartered banks that are not members of the Federal Reserve System: Federal Deposit Insurance Corp., Division of Compliance & Consumer Affairs, Washington, DC 20429 800-934-FDIC

Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission: Department of Transportation, Office of Financial Management, Washington, DC 20590 202-366-1306

Activities subject to the Packers and Stockyard Act: Department of Agriculture, Office of Deputy Administrator, GIPSA, Washington, DC 20250 202-720-705