



# EMPLOYMENT APPLICATION

At Dakota Plains Federal Credit Union we consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation,

Position(s) applied for: \_\_\_\_\_ Application Date: \_\_\_\_\_

How did you learn about us?  Ad  Relative  Friend  Member  Employment Agency  Other: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address    Number    Street    City    State    Zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_ SS # (Voluntary) \_\_\_\_\_

Best time to contact you: \_\_\_\_\_  AM  PM    Best number to contact you: \_\_\_\_\_

If you are under 18 years of age, can you provide required proof of your eligibility to work?  Yes  No

Have you ever filed an application with us before?  Yes  No

If yes, please give the date: \_\_\_\_\_

Do any of your friends or relatives work here?  Yes  No

Are you presently employed?  Yes  No

May we contact your present employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  
*Proof of citizenship or immigration status will be required upon employment.*  Yes  No

Date Available for Work: \_\_\_\_\_ What is your desired salary range? \_\_\_\_\_

Are you applying for:  Full-time  Part-time  Temporary  
 If temporary, what dates? From \_\_\_\_\_ to \_\_\_\_\_

Do you prefer:  First Shift  Second Shift  Third Shift  
 Mornings  Afternoon  Evenings

Are you currently on lay-off status and subject to recall?  Yes  No

Can you travel if a job requires it?  Yes  No

# EMPLOYMENT HISTORY

Beginning with your present (or last) job, include any job related military service assignments and volunteer activities. You may exclude any organizations which indicate race, color, religion, disabilities, gender national origin or other protected status.

Employer:	Dates Employed		Work Performed
	From:	To:	
Address:			
Phone Number(s):			
	Hourly Rate/Salary		
Job Title:	Starting	Ending	
Supervisor:			
Reason for leaving:			
Employer:	Dates Employed		Work Performed
	From:	To:	
Address:			
Phone Number(s):			
	Hourly Rate/Salary		
Job Title:	Starting	Ending	
Supervisor:			
Reason for leaving:			
Employer:	Dates Employed		Work Performed
	From:	To:	
Address:			
Phone Number(s):			
	Hourly Rate/Salary		
Job Title:	Starting	Ending	
Supervisor:			
Reason for leaving:			
Employer:	Dates Employed		Work Performed
	From:	To:	
Address:			
Phone Number(s):			
	Hourly Rate/Salary		
Job Title:	Starting	Ending	
Supervisor:			
Reason for leaving:			

If you require more space, please continue on separate piece of paper.

## EDUCATION

	Name & address of school	Course of study	Number of years completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (specify)				

Describe any specialized training, apprenticeship, skills and/or extra-curricular activities.


Describe any job-related training received in the United States military.


List professional, trade, business or civic activities, voluntary activities, offices held.


Other qualifications, specialized skills.


Rate your skill level for the following:	
Use of PC/Mac: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor/NA	Spreadsheets: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor/NA
Word Processing: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor/NA	Typewriter: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor/NA
Other _____: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor/NA	Other _____: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor/NA
REFERENCES	
Name	Telephone
Address	How known
Name	Telephone
Address	How known
Name	Telephone
Address	How known
APPLICANT'S STATEMENT	
<p>I certify that the answers given herein are true and complete. I further authorize investigation of all statements contained within this application for employment as deemed necessary in arriving at a decision for such employment. This application shall be considered active for a period not to exceed 45 days. Applicants wishing to be considered for employment beyond this time should inquire as to whether applications are being accepted. I hereby understand and acknowledge that, unless defined by applicable law, any employment relationship with <b>Dakota Plains Federal Credit Union</b> is of an "at will" nature, which means the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized officer of this credit union. In the event of my employment, I understand that any false or misleading information in this application and/or subsequent employment interview(s) may result in my discharge. I further understand that I am to abide by all rules and regulations of Dakota Plains Federal Credit Union.</p>	
Signature of Applicant	Date
For Personnell Department Use Only	
Arrange Interview? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Interview:
Remarks:	
Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of Employment:
Job Title:	Hourly Rate/Salary: \$ <span style="margin-left: 100px;">Branch:</span>
By:	