

EDUCATION AND TRAINING

School	Name and Location of School	Course of Study	No. of Yrs. Completed	Did you Graduate	Diploma or Degree
High School					
College or University					
Other (Please Specify)					

List any other education, training, special skills, or certificates/licenses that you possess which are relevant to the position for which you have applied:

List any machines or equipment for which you are qualified and/or with which you have experience which are relevant to the job for which you have applied:

PAST AND PRESENT EMPLOYMENT (Beginning with your most recent employer)

1. Previous Employer	Area Code/Phone	From Mo. /Year	To Mo. /Year	Name of Immediate Supervisor Title
Street Address		Salary		Your Position
City	State			Zip
2. Previous Employer	Area Code/Phone	From Mo. /Year	To Mo. /Year	Name of Immediate Supervisor Title
Street Address		Salary		Your Position
City	State			Zip
3. Previous Employer	Area Code/Phone	From Mo. /Year	To Mo. /Year	Name of Immediate Supervisor Title
Street Address		Salary		Your Position
City	State			Zip

Have you had any other experiences or do you possess other qualifications in addition to those indicated above which are relevant to the job for which you are applying?

If so, please describe: _____

IN AN EMERGENCY NOTIFY: (please print)

Name: _____

Relationship: _____

Telephone No.: Home (_____) _____

Work (_____) _____

REFERENCES

List co-workers (past and present) and/or persons not related to you (other than persons listed above) who can provide first-hand knowledge of your skills and abilities and whom we may contact.

	Name	Title	Business	Phone No.	Years Known
1					
2					
3					
4					

ADDITIONAL EMPLOYMENT – RELATED INFORMATION

List any relatives or friends working for this organization:

RELATIONSHIP	NAME	POSITION
_____	_____	_____
_____	_____	_____

1. What are your goals over the next five years?

2. What did you like most about your last job?

3. What did you like least?

RELEASE AND PRIVACY STATEMENT

IT IS UNDERSTOOD AND AGREED THAT ANY MISREPRESENTATION OR OMISSION BY ME IN THIS APPLICATION WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF THIS APPLICATION AND SEPARATION FROM VIRIVA COMMUNITY CREDIT UNION (THE COMPANY) SERVICE IF I HAVE BEEN EMPLOYED. FURTHERMORE, I UNDERSTAND THAT JUST AS I AM FREE TO RESIGN AT ANY TIME, THE COMPANY RESERVES THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE.

IN ACCORDANCE WITH THE FAIR CREDIT REPORTING ACT, A CONSUMER REPORT OR INVESTIGATIVE CONSUMER REPORT, INCLUDING INFORMATION ABOUT YOUR CREDIT, GENERAL REPUTATION, CHARACTER OR PERSONAL CHARACTERISTICS MAY BE OBTAINED. I VOLUNTARILY, AND KNOWINGLY, AUTHORIZE FOR INVESTIGATIVE AND/OR EMPLOYMENT PURPOSES ONLY, ANY PAST EMPLOYER OR SUPERVISOR, UNIVERSITY OR INSTITUTE OF LEARNING, ADMINISTRATOR, LAW ENFORCEMENT AGENCY, STATE AGENCY, FEDERAL AGENCY, CREDIT BUREAU, PRIVATE BUSINESS, MILITARY BRANCH OR THE NATIONAL PERSONNEL RECORDS CENTER, FINGERPRINTING, PERSONAL REFERENCE AND/OR OTHER PERSONS TO GIVE RECORDS AND INFORMATION THEY MAY HAVE CONCERNING MY CRIMINAL HISTORY, MOTOR VEHICLE HISTORY, DRIVING RECORD HISTORY, EARNINGS HISTORY, EMPLOYMENT RECORDS, BANKING RECORDS, CREDIT CARD TRANSACTION RECORDS, TELEPHONE TOLL RECORDS, CREDIT HISTORY, WORKER'S COMPENSATION CLAIMS, GENERAL REPUTATION, CHARACTER OR ANY INFORMATION REQUESTED TO VIRIVA COMMUNITY CREDIT UNION, KEYSTONE INTELLIGENCE NETWORK, INC., OR ITS AGENTS OR REPRESENTATIVES. I VOLUNTARILY AND KNOWINGLY UNCONDITIONALLY RELEASE ANY NAMED OR UNNAMED INFORMANT FROM ANY AND ALL LIABILITY RESULTING FROM FURNISHINGS OF THIS INFORMATION. THIS AUTHORIZATION SHALL BE VAILD FOR ONE YEAR FROM THE DATE SIGNED AND A PHOTOGRAPHIC OR FAXED COPY OF THIS AUTHORIZATION SHALL BE VALID AS THE ORIGINAL.

SIGNATURE OF PERSON COMPLETING FORM

DATE