

Dakotaland

FEDERAL CREDIT UNION

Application for Employment

If desired, a resume may be submitted along with this completed application.
Equal Opportunity Employer

Personal:

Full Name: _____ Social Security Number: _____

Street Address: _____ Phone Number: _____

City, State, Zip Code: _____

Is there another phone number at which you may be reached? _____

Can a message be left at this number? Yes No

Email: _____

How were you referred to us or learn of our organization? _____

Placement:

Position for which you are applying? _____ Starting salary you are seeking? \$ _____ per _____

What type of employment are you applying for?

Temporary part-time Temporary full-time Regular part-time Regular Full-Time

When could you begin employment: _____

Education:

Type of School:	Name & Address of School:	Number of Years Completed	Did You Graduate?	Major Course of Study and Degree Granted:
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High School: _____

College: _____

Other (specify): _____

Other (specify): _____

References:

Please list persons whom we may contact who know your qualifications.

Name	Address	Telephone	Occupation
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Have you ever signed an agreement related to non-compete, confidentiality or contract with a previous employer? _____
If YES, please state the company with whom the agreement was signed: _____

Employment History:

May we contact your present employer? Yes No

May we contact you at your present employer? Yes No

Please list your employment history in chronological order with most recent position first.

Present or Last Employer: _____ Phone Number: _____

Address: _____ Name & Title of Supervisor: _____

Dates Employed: from (month/year) _____ to (month/year) _____

Beginning Salary \$ _____ per _____ Ending Salary \$ _____ per _____

Starting Position: _____ Ending Position: _____

Reason for Leaving: _____

Previous Employer: _____ Phone Number: _____

Address: _____ Name & Title of Supervisor: _____

Dates Employed: from (month/year) _____ to (month/year) _____

Beginning Salary \$ _____ per _____ Ending Salary \$ _____ per _____

Starting Position: _____ Ending Position: _____

Reason for Leaving: _____

Previous Employer: _____ Phone Number: _____

Address: _____ Name & Title of Supervisor: _____

Dates Employed from (month/year) _____ to _____

Beginning Salary \$ _____ per _____ Ending Salary \$ _____ per _____

Starting Position: _____ Ending Position: _____

Reason for Leaving: _____

Signature:

Dakotaland Federal Credit Union makes no promise of employment by offering this application form or accepting your written response. No one is authorized to offer you employment with Dakotaland except in writing. Do not make or change any plans based on what anyone tells you orally. Any employment Dakotaland may offer you will be terminable "at will," which means you may quit at anytime, and Dakotaland may terminate you at anytime, with or without cause. Employment with Dakotaland shall be probationary for a period of ninety (90) calendar days after hire date.

By completing this application and signing below, you authorize Dakotaland to investigate your qualifications, including background checks and credit history, and make inquiries about you generally. By signing below, you are affirming that the statement you make in this application, plus any additional written and oral information you provide us about yourself are true, and that you have not omitted anything. You understand that any false statement or material omission is sufficient grounds for Dakotaland to reject this application without further consideration.

Signature of Applicant: _____ Date: _____