

EMPLOYMENT APPLICATION

It is the policy of **WEPCO FCU** to comply with various federal and state laws prohibiting discrimination because of age, sex, race, color, religion, national origin, disability, marital and veteran status. **Please exclude** any information that indicates the sex, age, race, color, religion, national origin, or disability of the applicant.

FEDERAL CREDIT UNION Please answer all questions neatly and completely --- this form is part of your personnel record.

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	<u>Informatio</u>						,		
Last Name	First Name Middle Initial			I		Other Name Employed Under		l Security ‡	ŧ
Present Street Address City County State					Zip Code	2	How	Long?	
Home Telephone Number Are you over 18 ar				and under 70 years of age? Are you legally e			igible to work in the U.S.?		
□Yes □No					□Yes □No Authoriza			tion #	
Are you related to anyone employed by the Credit Union?					Relat	elationship Name			
□Yes □No									
Were you previo	usly employed by the	e Credit Union?	Date St	Started Date Left		Left	Department		
□Yes □No									
Reason for Leavi	ng				I				
	been convicted of, contrastic violations)?	r pled guilty or <i>no</i>	lo contendi	re (no contest)	, in a dome	stic or foreign cour	t, to any	felony or r	misdemeanor
□Yes □No									
2. Have you ever	had any Bond cover	age modified or re	voked, or h	nas any applica	tion for a B	ond ever been dec	lined?		
□Yes □No	e response to either 1								
you answered "YES" to either question, please provide the full details below. If you need additional space, please attach a separate explanation.									
Type of Work Desired			Date Availa	ble	Wage or Salary Desired				
Educatio	n								
Circle highest grade completed	Name of School		Location Date		Dates (M			Graduated? Degree or Course	
Grammar	High School				From	То	Yes	No	
6 7 8	Community								
High 9 10 11 12	College College								
	College								
College 13 14 15 16	Graduate School								
If you did not gra	duate, why did you lo	eave school or coll	ege?						
Are you currently pursuing further studies? If Yes, which typ			e of school?	Where are you attending?					
			Day School Night School				ž	J	
What courses are	you presently taking	g or planning on ta	king?			I			

Employment His	story					
Account for your employment, ST work. Do not include any religious		nost rece	nt employment first.	Includ	de self-employment, summer,	, part time and verifiable, volunteer
Employer	Type of Business				Leaving Date	May we contact?
			MO	YR	MO YR	□Yes □No
Address	City		State		Zip Code Phone	
	•				F	
Starting Salary	Hourly	Hourly Final Salary			Hourly	Last Position
Starting Salary	Weekly	rillal Salal y			Weekly	Last Fusition
\$	Annually	\$			Annually	
Supervisor's Name	Reason(s) for Leaving					
Describe work and responsibilit	ties					
Employer	Type of Business		Starting Date		Leaving Date	May we contact?
			NAO.	VD	NAO VD	□Yes □No
Address						
Addiess	City		Jucc	_	ip code Thoric	
Starting Salary	Hourly	Final Sa	alary		Hourly	Last Position
*	Weekly	_			Weekly	
\$ Supervisor's Name	Annually Reason(s) for Leaving	\$			Annually	
Supervisor s ivame	Neason(s) for Leaving					
Describe work and responsibilit	ies.					
Employer	Type of Business		Starting Date		Leaving Date	May we contact?
Limployer	Type of Basiliess		Starting Date		LCaving Date	
			MO	YR	MOYR	□Yes □No
Address	City		State	Z	Zip Code Phone	
Starting Salary	Hourly	Hourly Final Salary			Hourly	Last Position
, , , , , , , , , , , , , , , , , , ,	Weekly				Weekly	
\$	Annually	Annually \$			Annually	
Supervisor's Name	Supervisor's Name Reason(s) for Leaving					
Describe work and responsibilit	ties					

Milita	ry Servi	ce		
Date (Mon		Branch of Service	Highest Rank Attained	Are you a member of a Military
From	То			Reserve or National Guard Unit?
				□Yes □No
Vhat speci	ific training did	you have while in the military that is re	elated to the position for which you have	ve applied?
	Lapses			
rom	То	Explain		
rom	То	Explain		
		-		
	a short stateme inars previously		uter software, or activities which quali	fy you for the stated position. State any

ACKNOWLEDGMENTS

In processing this employment application, the Credit Union may request that an investigative consumer report be prepared, which may include information as to your character, work experience, police and credit record. You have the right to request that the company disclose to you the nature and scope of the investigation. Such a request must be made in writing to the Human Resources Department within 90 days after you complete this application.

I hereby acknowledge that I have read the foregoing disclosure and ur	nderstand the same.						
Signature	Date						
PLEASE BE ADVISED THAT UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND ANY APPLICANT FOR EMPLOYMENT OR PROSPECTIVE EMPLOYMENT OR ANY EMPLOYEE TO SUBMIT TO OR TAKE A POLYGRAPH, LIE DETECTOR OR SIMILAR TEST OR EXAMINATION AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT.							
Signature	Date						
In the event of my employment by the Credit Union, I will comply with Union's policy manual or other communications distributed to all employment with the Credit Union will be AT WILL and may be termi any reason. I understand that no documents or statements of the Credit that in any way limits the Credit Union's right to terminate my employ WILL nature of my employment cannot be changed except by a format Credit Union.	employees. I understand that if I am hired, my inated by the Credit Union or me at any time for lit Union will constitute a contract of employment yment AT WILL . I further understand that the AT						
I certify that there are no misrepresentations, omissions, or falsificatio that the responses given are true, complete and accurate to the bes Without limiting the AT WILL status of my employment if I am hired, I application are unto me I may be immediately discharged.	st of my knowledge and are made in good faith.						
I also authorize the companies, schools or persons named in this apemployment, character, ability or experience together with any inforelease said companies, schools or persons from all liability for damage. Credit Union from liability resulting from obtaining this information.	ormation they may have regarding me. I hereby						
I agree to submit to a pre-employment physical and/or drug screen, if	required by the Credit Union.						
I hereby acknowledge that I have read the above statements and under	erstand the same.						
Signature of Applicant	 Date						