

Application for Employment

An Equal Opportunity Employer

- Please print. Answer all questions. You may attach a resume, however, your resume is not a substitute for this application.

Last Name	First Name	Middle Initial	Social Security No.		
			If you have an answering machine, may we leave a message on it? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Daytime Phone Number		Evening Phone Number (if different)			
Present Address (Street Name & #, or RR #/Box #)		City	State	Zip	Years There

- If you have lived at the above address less than three years, please provide former address below:

Address	City	State	Zip	Years There
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■ General

1. For what position are you applying? _____
2. What is your work availability? Full-time Part-time Day Shift Evening Shift Night Shift Temporary Overtime Weekends & Holidays
3. How did you learn about this job opening? _____
4. Are you now or do you expect to be engaged in any other business or employment? Yes No If yes, please explain.

5. Are you currently on "layoff" status, subject to recall? Yes No
6. Have you ever applied to us before? Yes No If yes, have you ever been employed by us before? Yes No
When? _____ What job? _____
7. Do you have a relative or friend employed by us? Yes No If yes, who? _____
8. Are you a citizen of the United States? Yes No If no, does your immigration status permit you to work? Yes No
These proofs must be provided to FISC: Visa, Green Card, Social Security Card, and Driver's License.
9. Have you ever been convicted of a felony? Yes No If yes, dates, type of offense: _____
10. Have you been convicted of a misdemeanor in the past five years (other than civil traffic violations)? Yes No
If yes, please indicate date and type of offense(s) _____
11. If applying for a position that requires driving, do you have a valid Maine license? Yes No
Driver's license # _____
12. If applying for a position that requires driving, have you ever been ticketed for a moving traffic violation?
 Yes No If yes, please explain. _____
13. If applying for a position that requires driving, do you own a vehicle which could be used by you on company business? Yes No
14. If under 18 years of age, can you provide proof of eligibility to work? Yes No
15. When would you be available for work? _____



■ Employment History, Part 1. We require complete history on each period of employment, self-employment, or unemployment. Please supply all information requested. If you were promoted, list that as a separate job. Treat each period of unemployment as a separate job. Begin with your most recent job, then work backwards in time to your first job. You must complete this employment history section even if you gave us a resume. If you served in the military, please treat your military experience the same as you would a job.

Are you presently employed? Yes No

Dates (Month/Year) From To		Company Name and Address	Supervisor's Name
			<input type="checkbox"/> You may contact this supervisor.
Title			Phone # ()
Duties			Beginning Rate of Pay \$
			Ending Rate of Pay \$
			Reason(s) for Leaving
This job is/was <input type="checkbox"/> full-time <input type="checkbox"/> part-time <input type="checkbox"/> temporary <input type="checkbox"/> summer <input type="checkbox"/> hourly <input type="checkbox"/> salaried			

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■ Employment History, Part 2. Use this page, if necessary, to complete your job history.

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			<input type="checkbox"/> You may contact this supervisor.
Title		Phone # ()	
Duties		Beginning Rate of Pay \$	
		Ending Rate of Pay \$	
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■ Education

Circle years of education completed: 6 7 8 9 10 11 12 14 16 18 20 20+

	School Name & Location	Course or Major	Degree Earned
Elementary			
High School			<input type="checkbox"/> GED <input type="checkbox"/> Diploma
Technical College			
College/University			
Graduate School			

Specialized training or apprenticeship _____

Special job-related skills and qualifications from employment or other experience _____

Honors, professional societies, hobbies _____

Skills

Check the equipment you can operate and add equipment which may not be listed:

- PC (IBM Compatible) MacIntosh Typewriter (WPM _____) Office Copier Fax 10-Key Calculator
- Bell & Howell Inserter IBM 3892/3890 Reader/Sorter Pitney Bowes Postage Machine

Other Equipment _____

- Software:
- Windows 2000 — Rate your proficiency with 1 novice and 10 expert: 1 2 3 4 5 6 7 8 9 10
 - Word 2000 — Rate your proficiency with 1 novice and 10 expert: 1 2 3 4 5 6 7 8 9 10
 - PowerPoint 2000— Rate your proficiency with 1 novice and 10 expert: 1 2 3 4 5 6 7 8 9 10
 - Excel 2000 — Rate your proficiency with 1 novice and 10 expert: 1 2 3 4 5 6 7 8 9 10
 - Internet Browser(s) — Rate your proficiency with 1 novice and 10 expert: 1 2 3 4 5 6 7 8 9 10
 - Outlook 2000 — Rate your proficiency with 1 novice and 10 expert: 1 2 3 4 5 6 7 8 9 10
 - Other Software _____ . 1 2 3 4 5 6 7 8 9 10

List three things you enjoyed most about your previous jobs.

What are the major contributions you made to your employer(s)?

Describe what you mean by customer service and give an example in which you feel you gave exceptional customer service.

At work, you develop a new way of doing things. (Check one) Would you keep it to yourself? Tell a co-worker about it? Discuss it with your supervisor? Other? _____

A customer calls you and is very angry because of a problem. (Check one) Would you hang up? Give the call to your supervisor to solve? Try to calm the customer and solve the problem yourself? Other? _____

Is there anything else about your experience or yourself that would be helpful for us to know?

Applicant's Certifications and Agreements

I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning previous employment, education, or other information they might have with respect to any subjects covered by this application. I release all such parties from any and all liability for any damage that may result from furnishing such information to you.

I understand that the misrepresentation or omission of facts in this application may constitute cause for refusal to hire or immediate dismissal.

I understand that as a condition of employment, I will be required to present ID which verifies my authorization for employment in the United States.

I authorize the company to obtain an investigative consumer or credit report from a consumer credit reporting agency as part of my application.

If I am offered employment at FISC, such employment will be at will by FISC or me, and may be terminated with or without cause, with or without notice.

Signature _____ Date _____

Thank you for applying at FISC.

Authorization Form

Credit Report and Criminal Background Check

I authorize Financial Institution Service Corp. (FISC) to obtain a credit report on myself through the credit reporting agency of its choice. If employed, I further authorize FISC to check my credit record, as needed, on a continuing basis as it relates to my employment.

Additionally, I authorize FISC to obtain a criminal background check on myself through the agency of its choice that will be limited to criminal convictions only. If employed, I further authorize FISC to check my criminal record, as needed, on a continuing basis as it relates to my employment.

I understand that if an adverse decision is made due totally or partially to the information on either my credit check or criminal background check, FISC will give me a copy of the credit report and/or criminal background check, a summary of my rights under the Fair Credit Reporting Act, and the source of the credit report or criminal background check so that I may contact them if I wish.

Signature _____ Date _____

