



Application for Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resource Department.

Position(s) applied for: _____ Date of Application: _____

Referral Source:

Advertisement Employee Relative Walk-in
 Government Employment Agency Private Employment Agency Other _____

Name of Source (if applicable) _____

Name: _____

Address: _____
Last First Middle
Street City State Zip

Telephone Number: _____ Cell Phone Number: _____ E-Mail Address _____

If necessary, best time to call you at home is: _____ am pm

May we contact you at work? Yes No

If yes, work number and best time to call: _____ am pm

If you are under 18 and it is required, can you furnish a work permit? Yes No

If no, please explain: _____

Have you submitted an application here before? Yes No

If yes, give dates: _____

Do any of your relatives or friends work at Corazo? Yes No

If yes, who: _____

Are you legally eligible for employment in this country? Yes No

If hired, do you have reliable transportation to and from work? Yes

Date available for work: _____ What is your desired rate of pay? _____

Type of employment desired: Full-time Part-time Temporary Seasonal Educational Co-Op

Will you relocate if job requires it? Yes No Will you travel if job requires it? Yes No

Are you able to meet the attendance requirements of the position? _____

Will you work over time if required? Yes No

Have you ever had a bond coverage modified, revoked or have you been declined for a bond? Yes No

Have you ever been convicted of a crime? Yes No

Omit misdemeanor marijuana convictions over two years old, misdemeanor convictions where probation has been served or discharged and the case dismissed minor traffic violations.

If yes, please provide date(s) and details: _____
Answering yes to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Driver's license number, if driving is an essential job function: _____ State: _____

Employment History

Provide the following information of your past and current employers, assignments or volunteer activities (exclude those volunteer activities that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status), starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

Employer _____ Phone number: _____ Dates employed:
Address _____ From _____ To _____
Starting job title/ Final job title _____
Immediate supervisor and title _____ Summarize the type of work performed:
Reason for leaving _____
May we contact for reference? Yes No Later _____

Employer _____ Phone number: _____ Dates employed:
Address _____ From _____ To _____
Starting job title/ Final job title _____
Immediate supervisor and title _____ Summarize the type of work performed:
Reason for leaving _____
May we contact for reference? Yes No Later _____

Employer _____ Phone number: _____ Dates employed:
Address _____ From _____ To _____
Starting job title/ Final job title _____
Immediate supervisor and title _____ Summarize the type of work performed:
Reason for leaving _____
May we contact for reference? Yes No Later _____

Employer _____ Phone number: _____ Dates employed:
Address _____ From _____ To _____
Starting job title/ Final job title _____
Immediate supervisor and title _____ Summarize the type of work performed:
Reason for leaving _____

May we contact for reference? Yes No Later

Comments (including explanation of any gaps in employment)

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Educational Background (if job related)

A. List last three (3) schools attended, starting with most recent. **B.** List number of years completed. **C.** Indicate degree or diploma earned, if any. **D.** Grade point average or class rank. **E.** Major field of study. **F.** Minor field of study (if applicable).

| A. School | B. # Years Completed | C. Degree | D. GPA | E. Major | F. Minor |
|-----------|----------------------|-----------|--------|----------|----------|
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References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

| Name | Phone number | Number of years know |
|------|--------------|----------------------|
| | | |
| | | |
| | | |

Additional Information

Volunteer activities (exclude those volunteer activities that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status).

List special accomplishments, publications, awards, etc. (exclude those volunteer activities that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve National Guard or any other similarly protected status).

List any additional information you would like us to consider.

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have requiring the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations and organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, for any or no reason and without prior notice, and the employer reserves the same right to terminate my employment at any time, for any or no reason without prior notice. This application does not constitute an agreement or contract for employment for a specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the forgoing Applicant Statement.

Signature of applicant: _____

Date: _____

Credit Report Disclosure and Authorization Form

In processing your application for employment or, if you are offered employment, at any time during your employment, Corazo Credit Union may obtain a consumer credit report from Equifax for employment purposes concerning credit worthiness, credit standing, and credit capacity.

_____ Check here, if you would like to receive a free copy of your credit report.

Upon receiving the copy of your credit report, if you want to dispute the accuracy or completeness of any item in it, you may contact the consumer reporting agency, whose address and telephone number are included in the report, and request an investigation. (A summary of your rights under the Fair Credit Reporting Act is attached to this form.) If you disagree with the accuracy of any information in the report, you must notify Corazo Credit Union within two days of the receipt of the report that you are challenging information in the report. Corazo Credit Union will not make a final decision on your employment status until you have had a reasonable opportunity to address the information contained in the report.

Note that if you are denied employment or an adverse employment action is taken based on information obtained in the credit report, you will be notified and provided with a copy of the report as well as a written description of your rights under the Fair Credit Reporting Act.

Please read this form carefully before signing and dating it below, which will authorize Corazo Credit Union to obtain a consumer credit report on you as part of the pre-employment background screening process or, if you are offered employment, for employment purposes at any time during your employment.

I consent to this investigation and hereby authorize Corazo Credit Union to obtain a consumer credit report on my background for employment purposes only and acknowledge that I have been provided with a summary of my rights under the Fair Credit Reporting Act.

Name: _____ Social Security Number: _____

Signature: _____ Date: _____

Date of Birth: _____

A Summary of Your Rights Under the Fair Credit Reporting Act

The Federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you—such as if you pay your bills on time or have filed bankruptcy—to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA 15 U.S.C. 1681-1681u, at the Federal Trade Commission’s web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you—such as denying an application for credit, insurance, or employment—must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, and if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs—to which it has provided the data—of any error). The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA’s investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- You can dispute inaccurate items with the source of the information. If you tell anyone—such as a creditor who reports to a CRA— that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- Outdated information may not be reported. In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA

For questions or concerns regarding: CRAs, creditors and others not listed below contact: Federal Trade Commission, Consumer Response Center-FCRA, Washington, DC 20580 202-326-3761

National banks, federal branches/ agencies of foreign banks (word “National” or initials “N.A.” appear in or after bank’s name):

Office of the Controller of the Currency, Compliance Management Mail Stop 6-6, Washington, DC 20551 800-613-6743

Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks): Federal Reserve Board, Consumer & Community Affairs, Washington, DC 20551 202-452-3693

Savings associations and federally chartered savings banks (word “Federal” or initials “F.S.B.” appear in federal Institution’s name):

Office of Thrift Supervision, Consumer Programs, Washington, DC 20552 800-842-6929

Federal credit unions (words “Federal Credit Union” appear in institution’s name): National Credit Union Admin., 1775 Duke Street Alexandria, VA 22314

State-chartered banks that are not members of the Federal Reserve System: Federal Deposit Insurance Corp., Division of Compliance & Consumer Affairs, Washington, DC 20429 800-934-FDIC

Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission: Department of Transportation, Office of Financial Management, Washington, DC 20590 202-366-1306

Activities subject to the Packers and Stockyard Act: Department of Agriculture, Office of Deputy Administrator, GIPSA, Washington, DC 20250 202-720-705