

# Community Bank Mankato - Employment Application

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_  
Last, First & Middle Initial

Current Address: \_\_\_\_\_  
Street, Apt #, City State & ZIP

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you 18 years of age or older?    Yes            No    **If you are under 18 years old, what is your age?**

In compliance with Federal and State Equal Employment Opportunity laws, qualified applicants are considered for all positions without regard to race color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, sexual preference, gender identity, gender expression, or any other protected classification.

## Desired Employment

What position or type of work are you applying for? \_\_\_\_\_

If hired, when will you be able to start? \_\_\_\_\_ Salary Desired? \_\_\_\_\_

Have you ever applied to this company before?    Yes    No    If so, when? \_\_\_\_\_

Have you ever worked for this company before?    Yes    No    If so, when? \_\_\_\_\_

Are you interested in:    Full-Time    Part-Time    Seasonal (school year only / summer only / other: \_\_\_\_\_)

What days and hours are you willing to work?    Mondays \_\_\_\_\_    Tuesdays \_\_\_\_\_  
 Wednesdays \_\_\_\_\_    Thursdays \_\_\_\_\_    Fridays \_\_\_\_\_  
 Saturday (mornings only)

How did you hear about the position or who referred you? \_\_\_\_\_

Are you a US Citizen and/or authorized to work in the United States?    Yes    No

**NOTE: Pursuant to our policy, applicants receiving an offer of employment will be asked to submit to a criminal background check.**

## Education

Did you complete High School and/or receive your GED?    Yes    No    If no, are you in High School or completing your GED now?    Yes    No

School Level	School Name & City, ST	Course of Study	No of Years Completed	Diploma / Degree
College, Trade or Business School				
College, Trade or Business School				
College, Trade or Business School				

**Work Experience** Please list your last three employers, starting with the most recent first

Name of Present or Last Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Starting Date (Mo & Yr): \_\_\_\_\_ Leaving Date (Mo & Yr): \_\_\_\_\_ Job Title: \_\_\_\_\_  
Description of Work Performed: \_\_\_\_\_  
Reason for Leaving this position? \_\_\_\_\_

Name of Present or Last Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Starting Date (Mo & Yr): \_\_\_\_\_ Leaving Date (Mo & Yr): \_\_\_\_\_ Job Title: \_\_\_\_\_  
Description of Work Performed: \_\_\_\_\_  
Reason for Leaving this position? \_\_\_\_\_

Name of Present or Last Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Starting Date (Mo & Yr): \_\_\_\_\_ Leaving Date (Mo & Yr): \_\_\_\_\_ Job Title: \_\_\_\_\_  
Description of Work Performed: \_\_\_\_\_  
Reason for Leaving this position? \_\_\_\_\_

**Military Service** Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Rank at discharge \_\_\_\_\_ Type of discharge \_\_\_\_\_

**References** Please list three professional references.

Name of Reference	Company	Phone Number	Email Address	Relationship with Reference

**Disclaimer and signature**

"I certify that the facts contained in this application and any accompanying resume are true and complete to the best of my knowledge. I understand that any falsification, omission, misrepresentation or concealment of information on this application or resume may be sufficient grounds for disqualification from further consideration for hire or immediate discharge and that the company shall not be liable in any respect if my employment is so denied or terminated.

I authorize investigation and verification of all statements contained herein and the references and former employers and employees to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise to include credit history, education, employment verification, personal references and criminal records. I release the company from all liability for any damage that may result from receiving and/or using such information.

I hereby understand and acknowledge that, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the Employer may discharge Employee at any time with or without cause or notice. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. I also understand that this application and any employee manuals or handbooks that may be distributed to me shall not be construed or relied upon as a contract.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_