

EMPLOYMENT APPLICATION

PERSONAL INFORMATION									
Name (Last Name, First Name)					Date				
Address					ate	Zip Code)		
Email Address					Mobile Phone				
Are you eligible to work in the U.S?									
EMPLOYMENT									
Position desired: Hourly Rate / Salary desired									
Hourly Rate / Salary desired Date you can start Are you currently employed? ☐ Yes ☐ No If so, may we inquire of your present employer? ☐ Yes ☐ No									
REFERRAL SOURCE Do you know anyone who works for our company?									
EDUCATION			Location of school		# of years a	attended	Degree received		
High School N	lame / GED								
College or Uni	versity								
Trade, Business or Correspondence School									
EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. Incomplete information could disqualify you from further consideration. From: To: Employer Name / Address Phone: Job Title:									
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Immediate supervisor:		Summary of job duties:			Reason for leaving:				

From:	То:	Employer Name / Address	Phone:		Job Title:				
Immediate supervisor:		Summary of job duties:		Reason for leaving:					
From:	То:	Employer Name / Address Phone:			Job Title:				
Immediate supervisor:		Summary of job duties:		Reason for leaving:					
AUTHORIZATION									
The Farmers Savings Bank is an equal opportunity employer. The Farmers Savings Bank does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual narassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service. understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for The Farmers Savings Bank to hire me. If I am hired, I understand that either The Farmers Savings Bank or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of The Farmers Savings Bank has the authority to make any assurance to the contrary.									
Realizing the banking business involves a trust relationship with its customers and their financial affairs, I hereby authorize The Farmers Savings Bank to make an investigation of my previous employment, criminal, personal and financial history. I release both The Farmers Savings Bank and all other parties from all liability or damage that may result in the release of any and all information concerning my previous employment, financial or credit report and any and all pertinent information they may have personal and otherwise. I further understand there are certain crimes, which under rederal or state law or The Farmers Savings Bank's insurance and bonding carrier's requirements may require the immediate termination of an employee. I understand that The Farmers Savings Bank has the right to administer random drug screens prior to and in the course of employment.									
attest with my signature below that I have given to The Farmers Savings Bank true and complete information on this application. No requested information has been concealed. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.									

Signature

Date