



THE FIRST NATIONAL BANK
EST. 1909 OF DIETERICH

Employment Application

(An Equal Opportunity Employer)

Name: (Last, First, M.I.)		
Address:		
City:	State:	Zip Code:
Home Phone ()		
Work Phone ()		
May we contact you at work <input type="checkbox"/> Yes <input type="checkbox"/> No		
Position(s) Applying For:		

By signing below, I understand that misstatements or omissions of information in connection with my application for employment can lead to rejection of my application or dismissal from employment, when discovered. I also, authorize the company to request references from my current and former employers, and I acknowledge that consideration for employment is contingent on the results of a reference and background check. Therefore, I hereby authorize the company to analyze the truthfulness of all statements made on this application; and to discuss those results with others involved in the hiring process. In addition, I give my consent for all contacted persons including current and former employers to provide information concerning this application, and I release each such person from liability for providing information to the company.

I understand that nothing contained in this application, or the granting of an interview is intended to create an employer/employee relationship between the company and myself either for employment or for the providing of any benefits. No promises regarding employment have been made to me unless made in writing. I further understand and agree that if I am hired, my employment would be "at will," as defined by law where our company operates. I would have the right to terminate my employment at any time for any reason and that the company would retain a similar right.

I understand that any offers of employment may be contingent upon my taking and successfully passing a drug and/or alcohol test in accordance with company policy. If I refuse to submit to testing, refuse to sign the company consent form, or test positive, the company will not employ me.

I hereby attest that all statements made by me above are true to the best of my knowledge, and I agree to the terms noted above.

Date: _____ **Applicant's Signature:** _____

NOTICE REGARDING BACKGROUND INVESTIGATION

First National Bank of Dieterich ("the Company") may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, fingerprint test by state police and/or FBI, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Bushue Background Screening, 104 N. Second St., Suite B, Effingham, IL 62401, (217) 342-3042, or toll free at (877) 342-3042, or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing First National Bank of Dieterich to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by First National Bank of Dieterich by contacting the consumer reporting agency identified above directly.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Bushue Background Screening, 104 N. Second St., Suite B, Effingham, IL 62401, (217) 342-3042, or toll free at (877) 342-3042, another outside organization acting on behalf of First National Bank of Dieterich, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Date: _____ **Applicant's Signature:** _____

PERSONAL DATA

Name:				Date:	
	<i>(Last Name)</i>	<i>(First Name)</i>	<i>(Middle)</i>		
Current Address:					
	<i>(Number)</i>	<i>(Street)</i>	<i>(City)</i>	<i>(State)</i>	<i>(Zip Code)</i>
Social Security #		Phone #	Phone # & Name to contact in case of Emergency		
I am (Check a Box) & will provide necessary documentation to validate that I am <input type="checkbox"/> A citizen or national of the United States or <input type="checkbox"/> Authorized by the Immigration and Naturalization Service to work in the United States.					
Have you ever been convicted of a crime (other than minor traffic violations)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when, where, and disposition of the conviction: _____ Note: An applicant for employment is not obligated to disclose sealed or expunged records of conviction or arrest.					

What type of experience do you have which would be helpful for the job you are applying for? _____	
Have you ever worked for this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when & where _____	
Date available to start:	
Are you available to work: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Days <input type="checkbox"/> Nights <input type="checkbox"/> Weekends List any day or hours you are unable to work: _____	
List Any Friends or Relatives working here:	
	(Name) (Relationship)
	(Name) (Relationship)
Please indicate your source of referral: <input type="checkbox"/> Company Employee <input type="checkbox"/> Newspaper <input type="checkbox"/> Employment Agency <input type="checkbox"/> Contacted On Own <input type="checkbox"/> Other Name: _____ Name: _____	

RESIDENTIAL HISTORY: <i>List all addresses in the last 7 years. (Information needed for background investigation only.)</i>					
Address	City	State	Zip	From	To
Address	City	State	Zip	From	To
Address	City	State	Zip	From	To

EDUCATION

Name & Location of School	Please Circle Last Year Degree Completed	Year Graduated	Course Work
{High School}	1 2 3 4		
{College}	1 2 3 4		
{Other}	1 2 3 4		

UNITED STATES MILITARY SERVICE

Do you have United States Military Experience? Yes No

Branch: _____

Date Entered:

Date Discharged:

Rank at Time of Discharge:

Special Skills or Training from Service:

Present Military Status:

WORK EXPERIENCE: List below your last four employers, starting with the most current one.

Company Name:		Address:			
Position:	Earnings – Beginning	Ending	Dates - From	To	
Supervisor -Name and Title			Phone ()		
Reason for Leaving					
Company Name:		Address:			
Position:	Earnings - Beginning	Ending	Dates - From	To	
Supervisor - Name and Title			Phone ()		
Reason for Leaving					
Company Name:		Address:			
Position:	Earnings - Beginning	Ending	Dates - From	To	
Supervisor Name and Title			Phone ()		
Reason for Leaving					
Company Name:		Address:			
Position:	Earnings - Beginning	Ending	Dates - From	To	
Supervisor Name and Title			Phone ()		
Reason for Leaving					
Please list any additional experience. _____					

Are there any other places you have worked in addition to those listed above? Yes No