APCO Employees Credit Union Application for Employment



We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, physical or mental handicap, sexual orientation, citizenship status, veteran's status, genetic information or any other status legally protected under federal, state, county or local regulations.

PLEASE PRINT

COMPLETE THE APPLICATION IN ITS ENTIRETY. IF A QUESTION DOES NOT APPLY, PLEASE WRITE N/A.

	Date of Application				
Personal Information					
First Name	Middle Name	Last Name			
Mailing Address					
City	State	Zip			
Cell Phone Number	Home Phone Number	er			
Best time for us to contact you: _	: am: pm Email Ad	dress			
Are you at least 18 years of age?	☐ Yes ☐ No				
Are you authorized to work in the If hired, proof of authorization to	United States?	ı the I-9 Form and E-Verify.			
Can you travel if a job requires it?	Yes No If yes, what percentage	age of the time?			
Have you been terminated or give	en the opportunity to resign in lieu of to	ermination in the last seven years? 🗌 Yes 🔲 No			
If yes, please explain					
Are you currently on layoff status	and subject to recall?				
Are you willing to work overtime?	☐ Yes ☐ No				
Position Information					
Position(s) applying for:					
Can you preform the essential fur	nctions of the job either with or withou	it reasonable accommodations? 🗌 Yes 🔲 No			
Type of employment desired:					
☐ Seasonal/Temporary ☐ Perr	manent				
Are you available to work at vario	us locations?				
Please explain:					
Desired salary:					
Have you ever worked for APCO I	Employees Credit Union before?	∕es □ No			
If yes, when and which branch? _					
Have you completed an application for APCO Employees Credit Union before?					
If yes, when and for what position(s)?					

How did you learn about careers at APCO Employees Credit	Union?					
☐ Social Media ☐ Referral ☐ Employment Agency ☐ Advertisement ☐ Company Website ☐ Other						
When are you available to begin working?						
Do you have any relatives or friends who work at APCO Emp		lo				
If yes, who, what is the relationship, and where?						
Why do you want to work for APCO Employees Credit Unior						
willy do you want to work for Al GO Employees credit offici						
Why do you desire to make a career change?						
willy do you desire to make a career change?						
Work History Start with your present or most recent position*. Include any Exclude organizations that indicate race, color, religion, cree sexual orientation, citizenship status, veteran's status, gener	d, gender, national origin, age, physi	cal or mental handic				
Employer						
Address	City	State	Zip			
Position(s) held						
Dates of Employment	Type of Employment					
Supervisor's Name and Title Telephone Number						
Reason for Leaving						
*May we contact your present employer?	Notice Required? ☐ Yes ☐ No					
Employer						
Address	City	State	Zip			
Position(s) held						
Dates of Employment	Type of Employment					
Supervisor's Name and Title	Telephone Number					
Reason for Leaving						
Employer						
Address	City	State	Zip			
Position(s) held						
Dates of Employment	Type of Employment					
Supervisor's Name and Title	Telephone Number					
Reason for Leaving						
Employer						
Address	City	State	Zip			
Position(s) held						
Dates of Employment	tes of Employment					
upervisor's Name and Title Telephone Number						
Reason for Leaving						

Military Service Would you like to provide any information about your military experience? ☐ Yes ☐ No					
in the position for which	ot to a non-compete agreement that we you are applying?			nt APCO Employees	s Credit Union
Education					
	Name and Address of School		Did you graduate?	Years Completed	Diploma/Degree
High School or GED					
Associate					
Bachelor					
Graduate					
Please list any foreign la and/or write that may be Please list any skills or que that may be relevant in that may be relevant in the Please list any licenses of that may be relevant in that may be relevant in that may applicable licer liftyes, please explain:	his position: or certifications you have his position: nses or certifications been revoked or so ut yourself you believe may be helpful to include any family members.)	uspended? [☐ Yes ☐ No ng your application		elated training
Type of Neterence		Ссираціон			
Name		Phone Number			
Type of Reference		Occupation			
Name	P	hone Numbe	r		
Type of Reference		Occupation			
of a crime that has not b	sted, charged, received a sentence for, peen expunged or dismissed by a court of ication of this application, which may re	ther than a m	inor traffic violatior	? Criminal records	not disclosed

Applicant's Statement

I certify the answers given are true and complete.

This application will be considered active for a period of time not to exceed 1 year. Any applicant wishing to be considered for employment beyond this period of time will need to inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with APCO Employees Credit Union is of an "at will" nature, which means the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such damage is specifically acknowledged in writing by an authorized executive of APCO Employees Credit Union.

l authorize investigation of all statements contained	in this application as may be necessary for arriving at an employment decision.
'	or misleading information given in my application or during my interview process n required to abide by all regulations of the Employer.
l have read and understood, and by my signature, co	nsent to these statements.
Signature of applicant	Date