



APPLICATION FOR EMPLOYMENT

NuUnion Credit Union is an equal opportunity employer and will not discriminate against any applicant on the basis of any classification protected by applicable state or federal law.

PLEASE PRINT OR TYPE AND COMPLETE ALL SECTIONS

PERSONAL					
NAME (LAST)		FIRST	MIDDLE INITIAL	SOCIAL SECURITY NUMBER	HOME PHONE
ADDRESS (NUMBER AND STREET)		CITY	STATE	ZIP CODE	OTHER PHONE
POSITION(S) APPLYING FOR		DATE AVAILABLE FOR WORK	SALARY DESIRED	WHAT HOURS CAN YOU WORK?	<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> TEMPORARY
ARE YOU LAWFULLY ENTITLED TO BE EMPLOYED IN THE UNITED STATES?		<input type="checkbox"/> YES <input type="checkbox"/> NO	EVER COVERED BY SURETY BOND?	<input type="checkbox"/> YES <input type="checkbox"/> NO	EVER DENIED SURETY BOND OR HAD SUCH COVERAGE REVOKED?
HAVE YOU EVER BEEN CONVICTED OF A CRIME? (THE RESPONSE TO THIS QUESTION WILL BE CONSIDERED IN THE CONTEXT OF ITS JOB RELATEDNESS ONLY.)		<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE STATE OFFENSE, DATE AND PLACE WHERE OFFENSE OCCURRED		
IF YOU WISH TO BE CONSIDERED FOR A POSITION WHICH MAY REQUIRE THE USE OF A CAR, PLEASE COMPLETE THIS SECTION		DRIVER'S LICENSE NO.	HAVE YOU BEEN INVOLVED IN ANY AUTO ACCIDENTS IN THE PAST TWO YEARS?	<input type="checkbox"/> YES <input type="checkbox"/> NO	HAVE YOU PAID TICKETS FOR MOVING VIOLATIONS?
HAVE YOU EVER WORKED FOR NU UNION BEFORE?		<input type="checkbox"/> YES <input type="checkbox"/> NO	NOTE: IF A DIFFERENT NAME IS NECESSARY TO CHECK A PRIOR WORK RECORD, PLEASE EXPLAIN BELOW.		
DO YOU HAVE ANY RELATIVE BY BLOOD OR MARRIAGE CURRENTLY EMPLOYED BY US OR HOLDING A POSITION AS AN ELECTED OFFICIAL OF NU UNION CREDIT UNION?		<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, GIVE NAME		
HOW WERE YOU REFERRED TO NU UNION?		SPECIFY HERE			
		<input type="checkbox"/> JOB FAIR	<input type="checkbox"/> SCHOOL	<input type="checkbox"/> NEWSPAPER (SPECIFY BELOW)	<input type="checkbox"/> NU UNION EMPLOYEE (SPECIFY NAME BELOW)
		<input type="checkbox"/> SELF	<input type="checkbox"/> WEB SITE		<input type="checkbox"/> OTHER (SPECIFY BELOW)
EXPLANATIONS					

INDICATE AREAS OF EDUCATION, SKILLS OR EXPERIENCE (CHECK ALL THAT APPLY)	<input type="checkbox"/> FINANCIAL INSTITUTION EXPERIENCE	<input type="checkbox"/> TELLER	<input type="checkbox"/> TELEPHONE COMMUNICATION
	<input type="checkbox"/> ACCOUNTING	<input type="checkbox"/> PERSONAL COMPUTER SKILLS	<input type="checkbox"/> CASH HANDLING
	<input type="checkbox"/> LOAN INTERVIEWER	<input type="checkbox"/> GENERAL CLERICAL	<input type="checkbox"/> KEYBOARDING WPM _____
	<input type="checkbox"/> MANAGEMENT/SUPERVISION	<input type="checkbox"/> OFFICE MACHINES (specify)	
	<input type="checkbox"/> RECEPTIONIST	<input type="checkbox"/> SECRETARIAL	
ADDITIONAL INFORMATION REGARDING SKILLS			
GENERAL EMPLOYMENT OBJECTIVE			

EXPERIENCE					
LIST LAST FIVE JOBS HELD, BEGIN WITH PRESENT, OR MOST RECENT					
EMPLOYER (MOST RECENT)			ADDRESS		
PHONE ()	NAME OF SUPERVISOR	MAY WE CONTACT FOR REFERENCES? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATES EMPLOYED FROM TO MM/YY MM/YY	STARTING POSITION	STARTING WAGE
FINAL POSITION	BRIEF DESCRIPTION OF DUTIES				<input type="checkbox"/> PART-TIME <input type="checkbox"/> FULL-TIME
FINAL WAGE	REASON FOR LEAVING				
EMPLOYER			ADDRESS		
PHONE ()	NAME OF SUPERVISOR	MAY WE CONTACT FOR REFERENCES? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATES EMPLOYED FROM TO MM/YY MM/YY	STARTING POSITION	STARTING WAGE
FINAL POSITION	BRIEF DESCRIPTION OF DUTIES				<input type="checkbox"/> PART-TIME <input type="checkbox"/> FULL-TIME
FINAL WAGE	REASON FOR LEAVING				
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FINAL POSITION	BRIEF DESCRIPTION OF DUTIES				<input type="checkbox"/> PART-TIME <input type="checkbox"/> FULL-TIME
FINAL WAGE	REASON FOR LEAVING				

EXPERIENCE CONTINUED

EMPLOYER		ADDRESS			
PHONE ()	NAME OF SUPERVISOR	MAY WE CONTACT FOR REFERENCES? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATES EMPLOYED FROM TO MM/YY MM/YY	STARTING POSITION	STARTING WAGE
FINAL POSITION	BRIEF DESCRIPTION OF DUTIES				<input type="checkbox"/> PART-TIME <input type="checkbox"/> FULL-TIME
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FINAL POSITION	BRIEF DESCRIPTION OF DUTIES				<input type="checkbox"/> PART-TIME <input type="checkbox"/> FULL-TIME
FINAL WAGE	REASON FOR LEAVING				

EDUCATION

TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSES MAJORED IN	LAST YEAR COMPLETED (CIRCLE)	DID YOU GRADUATE?		DEGREE	GRADE POINT AVERAGE
				YES	NO		
HIGH SCHOOL	NAME		9 10 11 12			X	
	CITY/STATE						
PRESENT/LAST COLLEGE	NAME		1 2 3 4				
	CITY/STATE						
PREVIOUS COLLEGE	NAME		1 2 3 4				
	CITY/STATE						
BUSINESS OR TRADE SCHOOL	NAME		1 2 3 4				
	CITY/STATE						

Michigan and federal law require employers to make accommodations to disabled applicants and employees where the accommodation does not impose undue hardship on the employer. Michigan law states that a person with a disability may claim a failure to accommodate against an employer only if that person notified the employer in writing of the need for accommodation within 182 days after the date the person with a disability knew or reasonably should have known that an accommodation was needed.

I certify that all statements on this Application for Employment are made completely, truthfully and without evasion, and further understand and agree that such statements if found to be false or if material information is found to be omitted, will be sufficient reason for not being employed, or if employed may result in my dismissal. I authorize the NuUnion Credit Union to investigate all statements contained herein. I authorize my former employers to give the credit union any information concerning my previous employment, including any disciplinary information, and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing this information. Also, I hereby waive written notice to me that employment information is being provided by any person or organization.

Further, I understand that it is the policy of the credit union to secure bonding, and conviction criminal history records as part of the pre-employment screening process and I specifically authorize the release of such information to the credit union.

I understand that I have an obligation to bring any claim, suit, or demand by whichever of the following deadlines is earlier: (1) the applicable statute of limitations; or (2) 301 calendar days after I knew or should have known that the event precipitating the claim, suit or demand occurred. Any time limit to the contrary is waived.

I realize that this application does not constitute an offer of employment by the NuUnion Credit Union, and that it creates no obligations. If employed, I understand that additional personal data will be required for determination of benefit eligibility and for security reasons. If I am employed, in consideration of that employment I agree to conform to the rules and regulations of the credit union. I also agree and understand that, if employed by the credit union, my employment with the credit union is at will, and I may terminate my employment with or without cause, and with or without notice, and that the credit union may terminate my employment with or without cause, and with or without notice. I further understand that no person, employee or agent of NuUnion Credit Union has the right to make promises to enter into an agreement inconsistent with the foregoing unless it is in writing and signed by the President of NuUnion Credit Union.

APPLICANT'S SIGNATURE	DATE	THIS APPLICATION WILL BE HELD ACTIVE FOR 6 MONTHS. IF YOU ARE NOT CALLED WITHIN 6 MONTHS AND WISH TO REAPPLY, YOU MAY DO SO BY SUBMITTING A NEW APPLICATION.