



Romney Federal Credit Union
62 West Main Street
Romney, West Virginia 26757
304-822-3116

Employment Application

Please complete the entire application

It is the policy of Romney Federal Credit Union to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

1. Applicant Information

Applicant Full Name: _____

Home Address: _____

City/State/ZIP: _____

Number of years at this address: _____

Daytime Phone: _____ Mobile Phone: _____

Social Security Number: _____

State and Driver's License Number: _____

2. Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: _____

Relationship to you: _____

Address: _____

City/State/ZIP: _____

Daytime Phone: _____ Evening Phone: _____

3. Job Position Applied For: _____

Full Time: _____ Part Time: _____

4. Salary Desired: \$ _____ per _____

5. Who referred you to Romney Federal Credit Union? _____

Do you have any friends or relative who work here? If yes, please list here:

6. Have you applied to Romney Federal Credit Union previously? Yes No

If yes, when? _____

7. Are you at least 18 years old? Yes No

8. How will you get to work? _____

9. Are you willing to work any shift, including nights and weekends? Yes No

If No, please state any limitations. _____

10. If applicable, are you available to work overtime? Yes No

11. If you are offered employment, when would you be available to begin work?

12. If hired, are you able to submit proof that you are legally eligible for employment in the United State? Yes No

13. Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation? Yes No

What reasonable accommodation, if any would you request?

14. Have you ever been convicted of a felony or misdemeanor?

Yes, I was convicted of _____ on _____ (date)

In _____ (city), _____ (state).

No

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.

15. Applicant's Skills

Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience and circle the number which corresponds to your ability for each skill. (One represents poor ability, while five represents exceptional ability.)

Skill	Years of Experience	Ability Rating
() Typing/Keyboarding	_____	1 2 3 4 5
() Microsoft Office Suite	_____	1 2 3 4 5

	(Word, Excel, etc.)								
()	Accounting/Bookkeeping	_____	1	2	3	4	5		
()	Answering Telephones	_____	1	2	3	4	5		
()	Filing	_____	1	2	3	4	5		
()	Customer Service	_____	1	2	3	4	5		
()	Human Resources	_____	1	2	3	4	5		
()	Counting Currency	_____	1	2	3	4	5		
()	Marketing/Advertising	_____	1	2	3	4	5		
()	Communication	_____	1	2	3	4	5		

16. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

a. Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

b. Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

17. Applicant's Education and Training

College/University Name and Address: _____

Did you receive a degree? _____ Yes _____ No

If yes, degree(s) received: _____

High School/GED Name and Address: _____

Did you receive a degree? _____ Yes _____ No

Other Training (graduate, technical, vocational): _____

Please indicate any current professional licenses or certifications that you hold: _____

Awards, Honors, Special Achievements: _____

Military Service: _____ Yes _____ No

Branch: _____ Specialized Training: _____

18. References

List any two non-relatives who would be willing to provide a reference for you.

a. Name: _____

Address: _____

City/State/ZIP: _____

Telephone: _____

Relationship: _____

b. Name: _____

Address: _____

City/State/ZIP: _____

Telephone: _____

Relationship: _____

19. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer: _____

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Romney Federal Credit Union to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the Credit Union by the CEO/Manager, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Romney Federal Credit Union, except in a specific written contract of employment signed on behalf of the Credit Union by its CEO/Manager, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE