

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: Thank you for your interest in employment with the University of Hawai'i Federal Credit Union. Please complete all portions of this employment application to be considered for employment at the University of Hawai'i Federal Credit Union. If you require an accommodation during the application process, including assistance in the completion of this employment application, please let us know. We are an equal opportunity employer. We do not discriminate on the basis of age, sex, religion, color, race, national origin, ancestry, marital status, disability, sexual orientation, gender identity, or expression, arrest and court record, domestic or sexual violence victim status, or any other protected category recognized by Hawai'i and federal laws. This employment application is valid for a three-month period after submission to the University of Hawai'i Federal Credit Union and only for the desired position. Consideration for employment after the three-month period requires completion and submission of a new application. Use additional paper if necessary to fully answer any question.

PERSONAL INFORMATION

First Name		Last Name			MI
Have you ever used any other names (for verification, criminal conviction & reference checks)? If so, please print.					
Current Address		Unit No.	City		State Zip Code
Home Phone		Mobile		Email	
As a condition of employment, you will be required to produce original documents establishing your identity and authorization to work, and to complete the U.S. Immigration and Naturalization Service's Form I-9. Can you, after employment, submit verification of your legal right to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you ever been convicted of any criminal offense including dishonesty or a breach of trust, or have you agreed to enter into a pretrial diversion of similar program in connection with a prosecution for such offense? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain		Have you ever had any bond coverage modified or revoked and if any application for a bond was ever declined? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain	

POSITION

Position you are applying for		Available Start Date	Desired Salary
Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Have you ever applied for this company? If Yes, when?	Have you ever worked for this company? If Yes, when?
Apart from religious observances, will you be able to work at all other times? <input type="checkbox"/> Yes <input type="checkbox"/> No		How did you learn about us? <input type="checkbox"/> Online: _____ <input type="checkbox"/> Job Fair <input type="checkbox"/> Relative: _____ <input type="checkbox"/> Employment Agency <input type="checkbox"/> Other: _____ <input type="checkbox"/> Branch/Walk-In	

EDUCATION

School Level	School Name	Location	Did You Graduate?	Degree Received
High School				
College				
Other				

EMPLOYMENT HISTORY

Please account for the last ten years of employment, starting with the present or most recent employer. Include self-employment, military service, summer and part-time jobs. For each employer, you must answer all questions and use additional paper if necessary following the same format.

Current or Last Employer		Job Title	
Address		City	State
Zip Code			
Dates Employed	From	To	May We Contact your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Last Supervisor		Title	Employer's Phone
Description of Work			
Reason(s) for Leaving			

Current or Last Employer		Job Title	
Address		City	State
Zip Code			
Dates Employed	From	To	May We Contact your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Last Supervisor		Title	Employer's Phone
Description of Work			
Reason(s) for Leaving			

Current or Last Employer		Job Title	
Address		City	State
Zip Code			
Dates Employed	From	To	May We Contact your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of Last Supervisor		Title	Employer's Phone
Description of Work			
Reason(s) for Leaving			

Current or Last Employer		Job Title		
Address		City	State	Zip Code
Dates Employed	From	To	May We Contact your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name of Last Supervisor		Title	Employer's Phone	
Description of Work				
Reason(s) for Leaving				

EMPLOYMENT GAP

Explain any period that you were not working during the past 10 years, other than due to personal illness, injury or disability.

REFERENCES

List name and telephone number of three business/work references that are not related to you and are not previous supervisors.
If not applicable, list three personal references that are not related to you.

Name	Job Title	Relationship to You	Phone	Years Known

JOB SKILLS, QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying. State any additional information you feel may be helpful to us in considering your application.

RELATED INFORMATION

If you are a member of any job-related organizations (professional, trade, etc.) or have received any job-related awards or accomplishments, list and describe them. Exclude any information that would reveal your age, race, sex, religion, color, national origin, ancestry, marital status, disability, sexual orientation, gender identity or expression, arrest court record, domestic or sexual violence victim status, or any other protected category recognized by Hawai'i and federal laws.

ADDITIONAL INFORMATION

Ten-Key by Touch Ten-Key by Sight Keyboard / WPM _____

List other business programs/machines used:

Microsoft Office

- Word
- Excel
- Power Point
- Outlook

APPLICANT'S STATEMENT
Please read carefully before signing

- A. I certify that the information contained in this application is true and complete. I understand that any false or misleading statements or omissions made in this application or interview(s), whenever discovered, are grounds for disqualification from further consideration or for dismissal from employment, regardless of how discovered.
- B. I understand that **my employment with University of Hawai'i Federal Credit Union is at-will and can be terminated at any time, for any reason, with or without advance notice by myself or the credit union.** I also agree to conform to the guidelines and policies of the Credit Union.
- C. I understand and agree that only the President/Chief Executive Officer of the Credit Union has any authority to enter into any agreement to employ me for any specified period of time or to modify terms and conditions of my employment. I agree that such an agreement must be in writing and signed by the President/Chief Executive Officer, and I will not rely upon any other representations regardless of the source.
- D. I understand and agree that the Credit Union may make a full and complete investigation of my personal or employment history, and authorize any former employer, person, firm, corporation, school, government agency, or other entity to provide the Credit Union with any information (including fact or opinion) they may have regarding me. In consideration of the Credit Union's review of this application, I release the Credit Union and all providers of any information from any liability which may arise as a result of furnishing and receiving this information. I understand and agree any employment offer or continued employment shall be conditional on the receipt of satisfactory references as determined by the Credit Union.
- E. I understand and agree that the Credit Union may make a full and complete investigation of my criminal history and may inquire into and consider any criminal conviction record and the Credit Union may disqualify me for employment or withdraw a conditional offer of employment if my criminal conviction bears a rational relationship to the duties and responsibilities of the position for which I am applying. I understand that any criminal conviction more than 10 years old, excluding time I was incarcerated, or that involves certain Family Court matters will not be considered. In addition, I understand the Violent Crime Control Act of 1994 prohibits the Credit Union from employing me if I had been convicted of a violation of that Act or any felony involving dishonesty or breach of trust.
- F. I understand and agree that if offered employment by the Credit Union, I may be required to disclose military service information in accordance with law, and that any such employment offer shall be dependent upon the receipt of a satisfactory military record as determined by the Credit Union.
- G. If hired, I agree not to disclose or use confidential information belonging to prior employers and that I will inform the Credit Union of any agreements that would limit my ability to work for the Credit Union.
- H. I understand and agree that all of the foregoing terms and conditions will become part of my employment relationship with the Credit Union if I am employed by the Credit Union.

Authorization/Signature of Applicant	Date
Print Name	