



EMPLOYMENT APPLICATION

Please return to:
Jennifer L. Beard, President
jbeard@fsbelmwood.com
Farmers State Bank
104 E Main Street
PO Box 620
Elmwood, IL 61529

Please be informed that Farmers State Bank has a strict screening process that includes:

- A criminal background check, and
- Verification of references

EMPLOYMENT APPLICATION

Farmers State Bank does not discriminate in hiring or employment on the basis of race, color, religion, sex, national origin, age, disability, veteran status or other factors identified and protected by federal, state or local legislation. No question on the application is intended to secure information to be used for such discriminatory purposes.

Farmers State Bank requires each candidate to complete an application.

Date of Application: _____

PLEASE PRINT IN INK AND ANSWER EVERY QUESTION

Position Applying For: _____

Name

Last	First	Middle (spelled out)
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Present Address

Street	City	State	Zip
Length of Time at Present Address: _____			

Previous Address

Street	City	State	Zip
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Telephone

Social Security Number

Home	Business	Social Security Number
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If you are under 18 years of age, do you have a work permit? YES NO

Type of work or position desired: _____ FT PT TEMP

Date available for work: _____

Have you ever admitted to or been convicted of a criminal offense (including felonies, misdemeanors, and pre-trial diversion programs) other than a minor traffic offense? (Note: A conviction record will not necessarily disqualify an applicant from employment with Farmers State Bank.) If yes, please indicate nature of the offense, location (city, state) and approximate date of the conviction. YES NO

Are you currently legally eligible (by reason of citizenship or legal alien status) for employment in the United States? YES NO

May we contact your current employer? YES NO

Name two business related individuals who know your job-related strengths as well as your weaknesses that we can contact.

Name	Company	Title	Phone
Name	Company	Title	Phone

EDUCATION

Legal name under which highest degree is granted:

Type of School	Name of Institution and Location	Major Subject/Minor Subject	Degree	G.P.A.
High School				
College or University				
Business or Vocational				
Other				

EMPLOYMENT HISTORY

Starting with PRESENT or MOST RECENT, please list all previous employers for at least 7 years. Include self employment, summer and part-time jobs and military service (do not include dates served in the military). If necessary, use an additional sheet of paper. Please complete all spaces.

Dates Employed From:		To:	Position Title:	
Company Name		Telephone Number		Job Duties
Number & Street		City & State		
Zip	Full Name of Supervisor			
Reason for leaving. If discharged or asked to resign, please explain.				

Dates Employed From:		To:	Position Title:
Company Name		Telephone Number	Job Duties
Number & Street		City & State	
Zip	Full Name of Supervisor		
Reason for leaving. If discharged or asked to resign, please explain.			

Dates Employed From:		To:	Position Title:
Company Name		Telephone Number	Job Duties
Number & Street		City & State	
Zip	Full Name of Supervisor		
Reason for leaving. If discharged or asked to resign, please explain.			

UNEMPLOYMENT STATEMENT

This section is to be completed for any period(s) of more than 30 days of unemployment in the last 7 years, unless the unemployment was due to a disability. List the dates of unemployment, address while unemployed and the reason for the period of unemployment.

DATES UNEMPLOYED	ADDRESS WHILE UNEMPLOYED	REASON
TO		
DATES UNEMPLOYED	ADDRESS WHILE UNEMPLOYED	REASON
TO		

APPLICANT STATEMENT

I CERTIFY THAT

All statements I have made on this application are true and complete to the best of my knowledge. I have withheld nothing that would, if disclosed, affect this application unfavorably.

I UNDERSTAND THAT

Any omission or misrepresentation of fact may result in refusal of employment or immediate dismissal; this employment application and any other Company documents or manuals do not constitute contracts of employment, and any oral or written statements of the contrary are hereby expressly disavowed and should not be relied upon by me;

I may voluntarily leave employment upon proper notice and may be terminated by the employer at any time for any reason;

I AUTHORIZE

The investigation of all statements I have made in this application; the release of references, grade transcripts, criminal background inquiry reports, credit reports, and additional information pertinent to my employment from sources identified in this application.

I HEREBY ACKNOWLEDGE THAT

I have read and understand the above statement.

Signature of Applicant

Print Name

Date