

APPLICATION FOR EMPLOYMENT COMMERCIAL BANK

Date of Application: _____

Please note that this Application will remain active for 3 months and you must then reapply.

Commercial Bank is an equal opportunity employer. We will not discriminate on the basis of any characteristic that is protected by applicable law. Michigan law requires that a person with a disability or disability requiring accommodation to perform the essential functions of the job must notify the employer in writing within 182 calendar days of the date that the need is known or should have been known. Federal law has no such requirement.

PERSONAL INFORMATION

Name: _____ Any other names used: _____

Address: _____
(Street)

(City)

(State)

(Zip)

Telephone Numbers: home: _____ cell: _____

Are you legally entitled to be employed in the United States? Yes _____ No _____

Are you at least 18 years old? Yes ___ No ___ If not, do you have a work permit? Yes ___ No ___

Have you been previously employed here? No _____ Yes _____ If so, when? _____

When and Reason for Leaving: _____

EMPLOYMENT DESIRED

Position(s) Applying For: _____ Full Time _____ Part Time _____

Are there any days/hours of the week you cannot work? _____

Describe any special training, skills, qualifications or other experience that relate to the position(s) applied for: _____

Wage Desired: _____ Date Available to Start: _____

EMPLOYMENT EXPERIENCE (List Current/Most Recent Job First; Can continue on back)

1.	Employer ▼	Date (From--To)	Work Performed	
Employer's Address ▼				
	Supervisor ▼	Hourly/Salary	Start \$	Final \$
Reason(s) for Leaving ▼				
2.	Employer ▼	Date (From--To)	Work Performed	
Employer's Address ▼				
	Supervisor ▼	Hourly/Salary	Start \$	Final \$
Reason(s) for Leaving ▼				
3.	Employer ▼	Date (From--To)	Work Performed	
Employer's Address ▼				
	Supervisor ▼	Hourly/Salary	Start \$	Final \$
Reason(s) for Leaving ▼				

Can we contact the employers listed? Yes _____ No _____

If not, which ones? _____

EDUCATION

	Less Than	High School	College/University	Grad/Trade
Years Completed: (Circle Number of Years)	9 th	9 10 11 12	1 2 3 4	1 2 3 4 5

School Name: _____ City: _____

Diploma/Degree: _____ Course of Study: _____

Any other training, apprenticeships, skills, licenses, certifications or registrations pertinent to your application? _____

MILITARY SERVICE RECORD

U.S. Armed Forces or State National Guard? Yes ___ No ___ Branch: _____

Dates: _____ Rank at Discharge: _____

Describe duties and any special training: _____

REFERENCES (Don't include relatives, former employers or persons known for less than 1 year)

1. Name ▼ Phone Number Years Acquainted

Address ▼

2. Name ▼ Phone Number Years Acquainted

Address ▼

3. Name ▼ Phone Number Years Acquainted

Address ▼

ADDITIONAL INFORMATION

Have you been convicted of a felony? Yes _____ No _____
(The response to this question will be considered in context of job relatedness only.)

If yes, please describe circumstances of offense and where and when it occurred:

Give any other information you feel may be helpful to us in considering your application:

Emergency Contact: _____

Name Relationship to You

Street City/State Telephone Number

AUTHORIZATION AND UNDERSTANDING

I understand that, before being offered employment, I may be requested to take a job-related employment test. If I have a disability that will affect my ability to take the test, I will inform Commercial Bank (“Bank”) before the test so that a reasonable accommodation can be discussed. The Bank may require documentation about the need for accommodation.

I verify that all of the information in this Application, during the hiring process, and during employment is and will be true and complete, and I understand that falsified or omitted information may result in termination of the hiring process or employment relationship.

I authorize investigation of all statements in this Application for any employment-related purpose. I release the listed references and all employers, except those specifically excepted below,* to provide you with any and all applicable information they may have. I release these references and former employers from all liability for any information they may give you, and I waive any requirement that the reference and former employer provide me with written or verbal notice of their response to your inquiry.

I understand that I may be required to take a drug and alcohol test before and during employment, and I consent to such a test, as well as any other job-related medical test or physical, and I release the Bank from any liability arising out of such tests or results. Further, I give my consent for the release of the test results and other relevant medical information to authorized Bank management for appropriate review.

I understand that the Bank is an at-will employer. As such, this hiring process and the employment relationship is at-will, so either party may terminate the employment relationship and the hiring process, with or without cause, with or without notice, at any time. I understand that this relationship can only be altered in writing, directed to me personally, and signed by the CEO of the Bank.

I agree that any action, claim or suit against the Bank, any employee acting on behalf of the Bank, or any director of the Bank, as a result of this hiring process, my employment or termination of employment, must be brought within 182 calendar days of the event giving rise to the claim, action or suit, or no later than the applicable limitations period established by statute, whichever is less

Signature Date

*Employers specifically excepted: _____

For Employer Use Only
Interviewed By: _____ Date: _____ Hired: Yes _____ No _____

Starting Date: _____ Position: _____ Wage: _____

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