

# Harleysville

*SINCE 1915* **BANK**

Harleysville Bank is an Equal Employment Opportunity (EEO) employer. Qualified applicants will receive consideration without discrimination based on race, color, religion, sex, sexual orientation, gender identity, national origin, age, disability, protected veteran or disabled status, or genetic information.

<b>APPLICATION FOR EMPLOYMENT</b>			
Last Name	First	Middle	Date
Street Address			Home Telephone
City, State, Zip			Cell Telephone
Have you ever applied for employment with us? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, Month/Year/Location _____			E-mail address
Position Desired			Pay Expected
			\$
Apart from absence for religious observance, are you available to work full-time? Yes <input type="checkbox"/> No <input type="checkbox"/>  If not, what hours can you work?			Will you work overtime if asked?  Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you legally eligible for employment in the United States?			When will you be available to begin work?
Have you ever been convicted of any crimes in the past ten years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court?  Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, describe in full.			Have you ever been bonded?  Yes <input type="checkbox"/> No <input type="checkbox"/>  If yes, with what employers?
Other special training or skills (languages, machine operations, etc.)			

<b>Education</b>					
<b>School</b>	<b>Name/Location</b>	<b>Course of Study</b>	<b>No. of years completed</b>	<b>Did you graduate?</b>	<b>Degree or Diploma</b>
Graduate				Yes <input type="checkbox"/> No <input type="checkbox"/>	
College				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Business/ Trade/ Technical				Yes <input type="checkbox"/> No <input type="checkbox"/>	
High School				Yes <input type="checkbox"/> No <input type="checkbox"/>	

<b>Personal References - <i>No family/relative or Harleysville Bank Employee references</i></b>			
<b>Name</b>	<b>Address</b>	<b>Phone Number</b>	<b>Occupation</b>
1.			
2.			
3.			

<b>Employment History</b>	Please provide accurate, complete full-time and part-time employment record. Start with your present or most recent employer.
1. Company Name	HR Dept. Phone Number
Address	Employed – (State month and year ) From: _____ To: _____
Job Title	Weekly Pay Start _____ Last _____
Describe Your Work	Reason for leaving

2. Company Name	HR Dept. Phone Number
Address	Employed – (State month and year ) From: _____ To: _____
Job Title	Weekly Pay Start _____ Last _____
Describe Your Work	Reason for leaving

3. Company Name	HR Dept. Phone Number
Address	Employed – (State month and year ) From: _____ To: _____
Job Title	Weekly Pay Start _____ Last _____
Describe Your Work	Reason for leaving

4. Company Name	HR Dept. Phone Number
Address	Employed – (State month and year ) From: _____ To: _____
Job Title	Weekly Pay Start _____ Last _____
Describe Your Work	Reason for leaving

We may contact the employers listed above unless you indicate those you do not want us to contact	<b><i>Do Not Contact</i></b>
<b>Do Not Contact</b> Employer Number (s) _____	Reason(s) _____

Describe any specialized training received relevant to the position for which you are applying.

### **Applicant's Signature**

Please read and understand the statement before signing your application:

The information I have provided in this Application of Employment is true, correct and complete. False, incomplete or misrepresented information of any kind will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to contact and obtain information about me from previous employers, educational institutions, and "references" I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my Application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 30 days. After that date, unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I understand fully and accept all terms and conditions in the above statement.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature