



Main Office
230 S. Dearborn Street, Suite 2962
Chicago, IL 60604

EMPLOYMENT APPLICATION

APPLICANT INFORMATION

Please print

Name Date of Application

Address (STREET) (CITY) (STATE) (ZIP CODE)

Email Address

Telephone # Secondary telephone #

Are you legally eligible for employment in this country? Yes No
(Proof of U.S. citizenship or immigration status will be required upon employment.)

If you are under 18, can you furnish a work permit? Yes No

If no, please explain

JOB INTERESTS

Position(s) applied for Desired Salary

Have you ever been employed here before? Yes No

If yes, list dates and position(s) held

Date available for work Desired employment: FT PT

USECU Main Office business hours of operation are 7:30 am to 5:30 pm, Monday through Friday.
Are you able to meet the attendance requirements of this position? Yes No

GENERAL INFORMATION

Have you ever pled guilty or no contest to, or been convicted of a crime? Yes No
(Such conviction may be relevant if job related, but does not bar you from employment.)

If yes, please provide date(s) and details

Drivers license # (if job related) State

Friends or Relatives now employed here

EMPLOYMENT HISTORY

Starting with your present or last employer, including military experience, list your last four (4) employers, assignments or volunteer activities. May we contact your present and past employers? Yes____ No____

Signature_____

Date_____

DATES From:	COMPANY NAME	POSITION
	To:	ADDRESS
SALARY	SUPERVISOR'S NAME	REASON FOR LEAVING
	SCOPE OF JOB PERFORMED	

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	To:	ADDRESS
SALARY	SUPERVISOR'S NAME	REASON FOR LEAVING
	SCOPE OF JOB PERFORMED	

EDUCATIONAL BACKGROUND

HIGH SCHOOL	DID YOU GRADUATE?	COURSE OF STUDY
CITY STATE		
COLLEGE	DID YOU GRADUATE?	DEGREE
CITY STATE	LAST DATE ATTENDED MONTH & YEAR	MAJOR
OTHER	DID YOU GRADUATE?	DEGREE
CITY STATE	LAST DATE ATTENDED MONTH & YEAR	MAJOR

REFERENCES

List name, address and telephone # of three (3) persons not related to you.

NAME	TELEPHONE
ADDRESS	
NAME	TELEPHONE
ADDRESS	
NAME	TELEPHONE
ADDRESS	

SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you for work with our credit union.

APPLICANT STATEMENT

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from U.S. Employees Credit Union service if I have been employed, whenever it is discovered.

I give U.S. Employees Credit Union the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability U.S. Employees Credit Union and its representatives for seeking such information, and all other persons, corporations or organizations for furnishing such information.

U.S. Employees Credit Union is an Equal Opportunity Employer. U.S. Employees Credit Union does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only 30 days. At the conclusion of this time, if I have not heard from U.S. Employees Credit Union and still wish to be considered for employment, it will be necessary to reapply and complete a new application.

If I am hired, I understand that just as I am free to resign at any time, U.S. Employees Credit Union reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of U.S. Employees Credit Union has the authority to make any assurances to the contrary.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I hereby acknowledge and certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

Signature of Applicant

Date