



BlueOx Credit Union is an equal opportunity employer. Applicants will receive consideration for employment without regard to race, color, sex, religion, national origin, citizenship, height, weight, marital status, disability, age, or any other legally-protected status. BlueOx Credit Union will provide reasonable accommodations to applicants with qualified disabilities in order to for apply for a position.

## **ANSWER ALL QUESTIONS - PRINT CLEARLY PERSONAL** Name Date of Application\_\_\_\_\_ Home Phone (\_\_\_\_\_) \_\_\_\_ Address:\_ Business Phone (\_\_\_\_\_) \_\_\_\_\_ Email address: Are you 18 years old or older? No 🗆 Have you ever been covered by a surety bond? Are you legally eligible to work in the USA Yes No No for any U.S. employer?..... Yes 🗆 No $\square$ Have you ever been denied a surety bond or had such coverage If offered employment, you will be required to provide revoked? documentation to verify eligibility. Yes 🗔 No 🗔 If yes to either, state dates and reasons: Have you filed an application here before? If yes, date(s) \_\_\_\_\_ Yes 🗆 No If yes, date(s) Have you been employed here before? Yes $\Box$ No If yes, name under which employed, if different Previous position \_\_\_\_\_ Reason for leaving \_\_\_\_\_ List any friends or relatives, other than a spouse, already employed here. \_\_\_\_\_\_ Are your employment or school records listed under another name? \_\_\_\_\_\_

# **EMPLOYMENT DESIRED** Position(s) applied for (please be specific. Do not say "any"): Part-time Full-time 🔲 Other Kind of work sought: Expected Pay \_\_\_\_\_ Date you can start \_\_\_\_\_ Please indicate experience and skills that relate to the position(s) applied for: **EDUCATION** Did you List Diploma No. yrs. Completed Graduate or Degree High School Name and Address College \_ Other (specify) Name and Address PROFESSIONAL LICENSES/CERTIFICATIONS Verification Number PAST AND PRESENT EMPLOYERS List below all present and past employment, beginning with your most recent, or attach resume. Name and Address of Company \_\_\_\_\_ Hourly Rate/Salary \_\_ Type of Business and Phone Number Ending Describe the work you did

Reason for Leaving

Supervisor's Name

2.			From _		To
Name and Address of Company				Mo/Yr	Mo/Yr
		Hourly Rate/Salary _			
Type of Business and Phone Number		Hourry Nate/Salary _	Starting	_	Ending
Describe the work you did					
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Reason for Leaving			Supervisor's Name		
3			From _		To
Name and Address of Company				Mo/Yr	Mo/Yr
		Hourly Rate/Salary _			
Type of Business and Phone Number			Starting		Ending
Describe the work you did					
Reason for Leaving			Supervisor's Name		
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4Name and Address of Company			From _	Mo/Yr	IO
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Type of Business and Phone Number		Hourly Rate/Salary _	Starting		Ending
Type of Business und Fronc Rumber			Starting		Litalia
Provides the condition of id					
Describe the work you did					
Reason for Leaving			Supervisor's Name		
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You must attach a separate sheet if you have been e	mployed by any employer r	not listed above.			
	Yes No 🗆				
May we contact your current employer?	162 NO				
May we contact past employers listed?	v = v =				
May we contact past employers listed?	Yes No				
If not, please indicate the one(s) that you do not	want us to contact				
in not, picase maleate the one(s) that you do not	want as to contact.				
Have you ever been discharged or asked to resig	n from any position?	Yes 🔲 I	No 🗆		
If yes, please explain.					

ANI ITADV				
MILITARY				
Have you had any exper	ience in the Armed Force	s of the United States?	Yes No No	
If yes, what branch?				
Discharge date:		Rank at discharge?		List any
special training:				
REFERENCES	(Do not list rela	tives or former employers)		
1. Name	Address		Phone	No. Years Known
2	Address		Phone	No. Years Known
3	Address		Phone	No. Years Known
Name	Address		Pilotte	NO. TEATS KITOWIT
How did you hear of an	open position here?			
		1		
ACCOMMODATION	ON OF DISABILITY			
Can you perform the ess	sential job functions of the	e position(s)for which you are ap	oplying, with or without reason	able accommodation?
	Yes No No			
Please describe the acco	ommodation, if any, that y	ou believe is needed:		
EMERGENCY CO	ONTACT			
Name and address of pe	erson to be notified in cas	se of emergency or accident:		
·		<i>-</i> .		
Name	Address		Ph	one

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Have you ever been convicted of or have pleaded "no contest," "nolo cont a criminal or vehicular misdemeanor or felony, driving under the influence traffic offenses, such as, for example, traffic tickets, that has not been judic	of alcohol or drugs, or military court martial, but excluding minor
If yes, when, where, nature of offense, and sentence:	
(A conviction will not automatically bar you from employment. Each coroffense, the date of the conviction, and the sentence imposed. All circu the offense, the date of the offense, the seriousness of the offense, and	mstances will be considered, including your age at the time of
Are there any felony charges currently pending against you?	Yes No No

### APPLICANT'S AUTHORIZATION AND ACKNOWLEDGMENT OF CONDITIONS

Please read carefully, initial each paragraph, and sign below.

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certify that the answers given by me on this application are true, correct and complete, to the best of my knowledge. I understand that an
nisstatement, misrepresentation, or omission of facts on this application or any documents used to obtain employment may result in rejectio
of this application or immediate discharge if I am employed, regardless of the time elapsed before discovery of the misstatement or omission.
urther certify that I, the applicant, have personally completed this application.

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#### **AUTHORIZATION OF DISCLOSURES**

I authorize BlueOx to investigate my references, prior employment, work record, education and other matters related to my suitability for employment and, further, authorize the references that I have listed, all prior employers, and all educational institutions attended, to disclose to BlueOx any letters, reports, and other information related to my records, including, but not limited to, my performance reviews and evaluations, discipline, commendations, awards, and all other employment information, without giving me prior notice of such disclosure. I understand and agree that they may express their opinions about me and my past or future performance. By providing this page of the application to the references, prior employers, and educational institutions attended, I release them, and their employees, managers, executives, board members, agents, or other representatives, to the fullest extent permitted by law, from any claims and liabilities for providing BlueOx with all information, and I release BlueOx and its employees, managers, executives, board members, agents or other representatives, to the fullest extent permitted by law, from any and all claims, and liabilities that may result from any use or disclosure of such information by BlueOx or any of its employees, managers, executives, board members, agents, or other representatives.

Initials	

#### **AT-WILL EMPLOYMENT**

If hired, I agree that BlueOx Credit Union can terminate my employment and compensation at its will for any reason or no reason, except an illegal reason, with or without cause, at any time, with or without advance notice or warning, and that BlueOx's decision is not subject to review outside BlueOx (except as may be provided by applicable statute). I understand and agree that no employee, manager, executive, agent, board member, or any other representative of BlueOx, other than the President/CEO, has authority to enter into any agreement for employment for any specified period of time or terminable for cause or to make any oral or written representation or agreement or to establish any practice of contrary to at-will nature of my employment relationship with BlueOx. I further understand and agree that only an agreement in writing expressly for the purpose of modifying the at-will nature of my employment and signed by me and the President/CEO of BlueOx can modify the at-will nature of my employment. I understand and agree that no other oral or written statement, policy, or practice and no provision of BlueOx's employee handbook can change the at-will nature of my employment.

Initials
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I understand and agree that, by signing this application, I would be accepting employment, if hired, on the terms set forth in this application and that my acceptance of such employment would supersede, revoke, cancel, and negate any prior statements, agreements, practices, policies, and representations, oral or written, if any, that BlueOx would employ me on any terms other than the terms set forth in this application.

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#### **LIMITATIONS ON LITIGATION**

In consideration of my employment, if hired, I agree:

- That any controversy or claim arising out of this application or my employment with BlueOx, or the termination of that employment, including, but not limited to, any claim of discrimination, retaliation or harassment or any other any claim under any state or federal civil rights statute or common law, shall be settled solely by arbitration in the County of Calhoun, State of Michigan, in accordance with the rules of the American Arbitration Association then pertaining. The decision of the Arbitrator shall be final and binding and neither party shall have any right of appeal therefrom. Judgment upon the award rendered by the Arbitrator may be entered in the Circuit Court for the County of Calhoun.
- The demand for arbitration must be submitted, in writing, to the Credit Union and to the American Arbitration Association at 1101 а d n

to ful fo	urel Oak Road, Suite 100, Voorhees, NJ 08043. The demand must be received by the American Arbitration Association within one indred eighty (180) days after the alleged violation, misconduct, breach or incident which gives rise to the request for arbitration. Failure file the demand with the American Arbitration Association within the said one hundred eighty (180) day time period shall constitute a ll and complete waiver of the claim, and a complete waiver of any right to compensation, benefits or damages. If the written demand r arbitration is not filed within the said one hundred eighty (180) day period, it is forever barred. The parties shall bear their own torney's fees associated with the arbitration except as otherwise provided by paragraph 2 of this Agreement.
3.	I am waiving my right to adjudicate claims against the credit union in court, and that i am opting instead to arbitrate any such claims.
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DO	OCUMENTATION AND CERTIFICATION OF AUTHORIZATION TO WORK IN USA
co an wo	ertify that I am legally authorized to work in the United States for any U.S. employer. I understand that any offer of employment is nditional upon my ability to provide documents required by the Immigration Reform and Control Act of 1986 proving both my identity and authorization to work in the United States, and that failure to provide documents proving both my identity and authorization to ork in the United States, and that failure to provide those documents will result in revocation of the offer or the termination of apployment. I certify that I am able to provide documents that demonstrate my identity and work authorization and that I will assist ueOx in completing Form I-9 Employer Verification.
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