Baylands Family Credit Union Application for Employment

Baylands Family Credit Union (BFCU) is an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis that does not prohibit performance of essential job functions. This application for employment shall not be construed as a contract of employment. Employment with BFCU is based on the "at-will" doctrine, meaning that either the employee or the employer may terminate the employment relationship at any time and for any reason. BFCU adheres to all applicable, local, state and federal employment laws. Applications are active for 60 days.

PERSONAL INFORMATION

Full Legal Name:			Date:		
Present Address:	resent Address:			ne Number:	Mobile Number:
Social Security Number:			E-mail A	ddress:	
Are you over 18 years of age?			•		attended school under No
Yes No					
	1	1.0 0		ler what name?	
Are you legally authorized to wo	ork in the Unite	ed States?	Yes	No	
Will you now or in the future red	quire sponsorsh	hip for em	ployment	visa status (e.g. l	H-IB, F-l visa status)?
Yes No					
Do you have any relatives who are presently or who have been previously employed by this company? Yes No If yes, explain:					
POSITION DESIRED					
Position Desired:					
How did you learn of this opening?					
EDUCATION					
School Name of School	ol	Location		Years Attended	d Degree/Diploma
High School					
College					

Technical				
Other				
Special Certifications				
MILITARY S	SERVICE		<u> </u>	
Branch of Service		Dates Served	Т.	Rank at Discharge
Branch of Service	ce	Dates Served	r	Rank at Discharge
Education and T	raining			
Education and 1	Tunning			
EMPLOYME	NT RECORD			
_	work experience for the pas	t five years, beginning	with your most recen	iob held. Use a
	o list additional employers.	ciro jours, occiming	jour most recen	Joo nord. Obo d
Transfer to	The second complete second			
Name of most re	ecent employer:	Telephone Number	Name of Last Superv	visor
	- •	-	•	
Address:		Dates of Employmen	t (Month/Vear)	
Address:		Dates of Employmen	i (ivioliui/ i ear)	
		To:	From:	
City, State, Zip:		To: Ending Wage		s Ending Bonus
City, State, Zip:			From: Ending Commission	s Ending Bonus
				s Ending Bonus
City, State, Zip: Your Last Job T				s Ending Bonus
	itle:			Ending Bonus
Your Last Job T	itle:			s Ending Bonus
Your Last Job T	itle:			Ending Bonus
Your Last Job T	itle:			s Ending Bonus
Your Last Job T Your Job Respo	Title:			s Ending Bonus
Your Last Job T	Title:			s Ending Bonus
Your Last Job T Your Job Respo	Title:			s Ending Bonus
Your Last Job T Your Job Respo Reason for Leav	ritle:	Ending Wage	Ending Commission	
Your Last Job T Your Job Respo	ritle:			
Your Last Job T Your Job Respo Reason for Leav	ritle:	Ending Wage	Ending Commission	
Your Last Job T Your Job Respo Reason for Leav	ritle:	Ending Wage	Ending Commission Name of Last Superv	
Your Last Job T Your Job Respo Reason for Leav Name of most re	ritle:	Ending Wage Telephone Number Dates of Employment	Name of Last Supervit (Month/Year)	
Your Last Job T Your Job Respo Reason for Leav Name of most re	ritle:	Ending Wage Telephone Number	Ending Commission Name of Last Superv	
Your Last Job T Your Job Respo Reason for Leav Name of most re	ritle: ring: ecent employer:	Ending Wage Telephone Number Dates of Employment	Name of Last Supervit (Month/Year)	visor

Your Last Job Title:			
Your Job Responsibilities:			
Reason for Leaving:			
Name of most recent employer:	Telephone Number	Name of Last Supervis	or
Address:	Dates of Employmen	t (Month/Year)	
	То:	From:	
City, State, Zip:	Ending Wage	Ending Commissions	Ending Bonus
Your Last Job Title:			
Your Job Responsibilities:			
Reason for Leaving:			
Name of most recent employer:	Telephone Number	Name of Last Supervis	or
Address:	Dates of Employmen	t (Month/Year)	
	То:	From:	
City, State, Zip:	Ending Wage	Ending Commissions	Ending Bonus
Your Last Job Title:	l		I
Your Job Responsibilities:			
Reason for Leaving:			

EMPLOYMENT RECORD We will contact all of the employers listed on this application unless you specify otherwise. Please list any employers below		
Employer's Name	Reason	
Employer's Name	Reason	

REFERENCES Provide three personal references. Do not include relatives or former employers.		
Name	Address	Telephone Number
Occupation	Relationship	Years Known
Name	Address	Telephone Number
Occupation	Relationship	Years Known
Name	Address	Telephone Number
Occupation	Relationship	Years Known

WORK AVAILABILITY 1. Do you have any objection to working overtime (if required by this position)? Yes No Comments: 2. Can you work overtime without prior notice (if required by this position)? Yes No Comments: 3. Can you travel (if required by this position)? Yes No Comments: 4. Can you work on weekends (if required by this position)? Yes No Comments: 5. Do you have means for reliable transportation to work? Yes No Comments: ADDITIONAL INFORMATION An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full			
1. Do you have any objection to working overtime (if required by this position)? 2. Can you work overtime without prior notice (if required by this position)? 3. Can you travel (if required by this position)? 4. Can you work on weekends (if required by this position)? 5. Do you have means for reliable transportation to work? Comments: ADDITIONAL INFORMATION An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full	WORK AVAILABILITY		
Comments: 3. Can you travel (if required by this position)? Comments: 4. Can you work on weekends (if required by this position)? Comments: 5. Do you have means for reliable transportation to work? Comments: ADDITIONAL INFORMATION An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full	1. Do you have any objection to working overtime (if required by this position)?	Yes	No
4. Can you work on weekends (if required by this position)? Sometiments: Yes No Tomments: Yes No Tomments: ADDITIONAL INFORMATION An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full		Yes	No
5. Do you have means for reliable transportation to work? Comments: ADDITIONAL INFORMATION An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full		Yes	No
ADDITIONAL INFORMATION An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full		Yes	No
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full		Yes	No
qualifications for the specific position for which you are applying.	An application form sometimes makes it difficult for an individual to adequately sun		

Baylands Family Credit Union Application Form Acknowledgement

In	exchange	for the	consideration	of my	iob	applicati	ion, I agre	e that:
					.,		,	

Neither the acceptance of this application, nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, shall serve to create an actual or implied contract of employment, or otherwise change in any respect the employment-at-will relationship between Baylands Family Credit Union and the undersigned. Both the undersigned and Baylands Family Credit Union and its affiliates may end the employment relationship at any time, without specified notice or reason. If employed, I understand that Baylands Family Credit Union may unilaterally change or revise their benefits, policies and procedures at any time.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts in this application is cause for dismissal at any time without any previous notice. I hereby give Baylands Family Credit Union permission to contact schools, previous employers (unless otherwise indicated), references and others, and hereby release Baylands Family Credit Union from any liability as a result of such contact.

I also understand that Baylands Family Credit Union maintains a high degree of company and member confidentiality due to the nature of its business. I also acknowledge that Baylands Family Credit Union has in its possession data that contains individual identifiable health information as defined by the Health Insurance Portability and Accountability Act of 1996, Pub. L. No. 104-191 ("HIPAA") and the regulations included in that Act. I agree to maintain the confidentiality of the company's policies and patients.

Applicant Signature	 Date
Applicant Signature	 Date

Baylands Family Credit Union Release of Information Acknowledgement

This authorization and consent for release of personal information acknowledges that Baylands Family Credit Union ("BFCU") and/ or its agents may conduct investigations. These investigations might include, but are not limited to, searches of financial or credit agencies, records of previous employment including detailed information on work history, searches of educational institutions, military records, criminal history information on file in local, state or federal agencies, workers compensation and motor vehicle/driver's license records.

I understand that these searches will be used to determine employment eligibility under the institution's employment policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representatives of the institution. In addition, I release and discharge the institution and its agents and associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs, expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information. I understand that this notice will apply to any other future update reports that may be requested and is valid for up to two months from the date below for hiring purposes.

After reading this document, I understand fully its complete contents and I authorize the background verification.

Signature	Date
Digitatore	Bate
D. C. LAT	D (CD' 4
Printed Name	Date of Birth
Other Names Known By (Maiden, etc)	Social Security Number
Other Names Known by (Warden, etc)	Social Security Mullioei
Street Address	
Street Address	
City, State, Zip	
, ,, _F	

Baylands Family Credit Union Release of Consumer Report

This Consumer Disclosure informs you that a consumer report or an investigative consume report may be obtained from a consumer reporting agency for the purpose of evaluating you for employment, promotion, reassignment or retention as an employee either prior to hire or at any time during your employment.

The Federal Fair Credit Reporting Act defines "consumer reports" as "any written, oral, or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character general reputation, personal characteristics, or mode of living." The Fair Credit Reporting Act defines an "investigative consumer report" as "a consumer report or portion thereof in which information on a consumer's character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, or associates of the consumer reported on or with others which whom he is acquainted or who may have knowledge concerning any such items of information."

In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, Baylands Family Credit Union will provide you with a copy of the consumer report and a description in writing of your rights under the Federal Fair Credit Reporting Act (FFCRA). Consumer Disclosure is provided to you to comply with the legal requirements of the FFCRA and the Consumer Credit Reporting Reform Act of 1996.

After reading this document, I understand fully its complete contents and I authorize the background verification.

Signature	Date
Printed Name	Date of Birth
Other Names Known By (Maiden, etc)	Social Security Number
Street Address	
City, State, Zip	

BACKGROUND INFORMATION

Applicants/Employees: Ple	ase provide the following informati	on to facilitate a background check:
Last Name	First	Middle
		I have no middle name
Other Names/Alias		
Social Security #*	Date of Birth*	Phone Number
Driver's License #	_	State of Driver's License**
Present Address		
City/State/7in		
City/State/Zip		
	ess(es) over the past 7 years, including	
Address:		Dates:
Address:		Dates:
Address.		Dates.
Address:		Dates:
110010551		Sucesi
Address:		Dates:
Address:		Dates:
11001000		2 100 50
May we contact your current	t employer? YES: NO:	
The fellowing information w	vill be used for the application of st	oto anosifio an commonaction anosifio
consumer reporting restriction		ate-specific or compensation-specific
Anticipated Salary or Annua	l Compensation: \$	
State in which position being	g offered or where majority of work	will be performed:
Signature		Date:

Note: If you do business in Utah, you cannot ask for DOB, driver's license, or SSN until either a confidential offer of employment or at the time the background report will be run.

^{*}This information will be used for background screening purposes only and will not be used as hiring criteria.

^{**} If you will be requesting driving records, we recommend that you have this form notarized.

ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the separate document entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by Baylands Family Credit Union ("Employer") at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by HR Screening Services, Inc., 521 Cedar Way, Oakmont, PA 15139, 800-261-6268, www.hrscreening.com and/or Employer. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

New York applicants only: Upon request, you will be informed whether or not a consumer report was requested by the Employer, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Employer by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law.

New York City applicants only: You acknowledge and authorize the Employer to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.

Washington State applicants only You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Minnesota and Oklahoma applicants only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Employer.

Signature	Date:

DISCLOSURE REGARDING "INVESTIGATIVE CONSUMER REPORT" BACKGROUND INVESTIGATION

Baylands Family Credit Union (the "Company"), to which you have applied for employment, may request an investigative consumer report about you from a third party consumer reporting agency, in connection with your employment or application for employment (including independent contractor or volunteer assignments, as applicable). An "investigative consumer report" is a background report that includes information from personal interviews (except in California, where that term includes background reports with or without information obtained from personal interviews). The most common form of an investigative consumer report in connection with your employment is a reference check through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, personal characteristics, mode of living, or credit standing. You may request more information about the nature and scope of an investigative consumer report, if any, by contacting the Company.

You have the right, upon written request made within a reasonable time, to request (1) whether an investigative consumer report has been obtained about you, (2) disclosure of the nature and scope of any investigative consumer report and (3) a copy of your report These reports will be conducted by **HR**Screening Services, Inc., 521 Cedar Way, Oakmont, PA 15139, 800-261-6268, www.hrscreening.com.

The scope of this disclosure is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of investigative consumer reports throughout the course of your employment to the extent permitted by law.