

APPLICATION FOR EMPLOYMENT

Orem City Employees Federal Credit Union is an equal opportunity employer. All applicants will be considered regardless of race, color, religion, sex, national origin, age, marital, or veteran status; disability; or any other legally protected status. Equal access to the hiring process, services, and employment is available to all persons. Applicants requiring accommodations to the application and/or interview process should contact OCEFUC at 801-229-7168.

Each question should be answered completely and accurately. **No action will be taken on this application until all questions have been answered and the application has been signed and dated.** Verification of eligibility to work in the U.S. will be required if an employment offer is made.

Required fields are labeled in green. **Optional fields** have been labeled in gray.

CONTACT INFORMATION

First Name

Middle Name

Last Name

Street

Apt Number

City

State

Zip Code

Home Phone

Cell Phone

Email

Social Security Number

EMPLOYMENT INFORMATION

Drivers License Number

If hired, how long do you expect to work for OCEFCU?

1-2 years
2-4 years
4+ years

Please list any foreign languages you are fluent in

Spanish (Other)

Have you been convicted of, plead guilty to, or plead no contest to a felony or misdemeanor (other than minor traffic violations such as speeding)? Yes No

EDUCATION

	High School	College/University	Graduate/Professional
School Name			
Diploma/Degree			
Honors Received			
Course of Study			

EMPLOYMENT EXPERIENCE

List all of your work experience, including military and voluntary service assignments. Start with your present or last job.

Employer

Telephone

Address

Job Title

Dates employed From
To

Starting Salary

Final Salary

Reason for Leaving

Work Performed

May we contact this employer? Yes No

Employer

Telephone

Address

EXPERIENCE CONT.

Job Title

Dates employed From
To

Starting Salary

Final Salary

Reason for Leaving

Work Performed

May we contact this employer? **Yes** **No**

Employer

Telephone

Address

Job Title

Dates employed From
To

Starting Salary

Final Salary

Reason for Leaving

Work Performed

May we contact this employer? **Yes** **No**

Employer

Telephone

Address

Job Title

Dates employed From
To

Starting Salary

Final Salary

Reason for Leaving

Work Performed

May we contact this employer? Yes No

SKILLS & TRAINING

Summarize any job-related skills or specialized training.

List any additional information you would like us to consider.

REFERENCES

Give the name and telephone number of three (3) business/work references who are not related to you. List at least one of your previous supervisors.

Name

Company

Job Title

Phone

Other Phone

Name

Company

Job Title

Phone

Other Phone

Name

Company

Job Title

Phone

Other Phone

Please include your resume with this application. Thank you!

AFFIRMATIVE ACTION PLAN VOLUNTARY SURVEY

Orem City Federal Credit Union is required by law to maintain an affirmative action program and to collect information regarding the race, sex, national origin, disability, or veteran status of applicants. To assist us in our governmental recordkeeping requirements, we would appreciate your completion of this data form. **Your cooperation is voluntary. The information supplied will be kept confidential and will be used to improve our recruiting efforts and support our commitment to diversity in the workplace.** If you choose to volunteer the requested information, the data will be physically separated from the remainder of the job application before the application is considered for possible employment. The information will be kept in a confidential file separate from your application for employment.

Thank you for your cooperation!

Sex Female Male

Ethnic Background American Indian/Alaskan
Native Asian/Pacific Islander
Black
Hispanic
White

Disabled Yes No

Veteran Yes No

Referral Source Friend
Relative
Employment Agency
Walk In
Other

ACKNOWLEDGEMENTS

Accuracy of Information. I certify that the information in this application is correct to the best of my knowledge. I understand that any misrepresentation or omission of any fact in my application, resume, or any other materials, or during interviews is grounds for disqualification from further consideration for employment, or for termination if employed.

Information Release. I authorize Orem City Employees Federal Credit Union to contact any company, institution, or individual it deems appropriate to investigate my employment history, character, criminal background, qualifications, driving record, and other job-related information. I give my full consent for all contacted persons, including former employers, to provide the information concerning this application. Further, I waive my right to bring a claim against these individuals for any damages arising from furnishing the requested information to OCEFCU. I also release OCEFCU from all liability that might result from checking such references.

Application Status. I understand that this application is current for only 90 days. At the conclusion of this time, if I have not heard from OCEFCU and still wish to be considered for employment, it will be necessary to request for the application to be reactivated by Orem City Employees Federal Credit Union.

At-Will Employment. I understand that if I am hired, my employment at OCEFCU is "at-will" and may be terminated by me or by OCEFCU at any time for any reason, with or without cause or notice. I understand that no employment offer is being made by OCEFCU at this time. I also understand that nothing in this application is intended to imply or create an employment contract and that no OCEFCU representative has the authority to make any assurance to the contrary.

Click the box to indicate that you have read and accept the acknowledgements.

AUTHORIZATION TO PAST EMPLOYER, SCHOOL, OR OTHER INSTITUTION TO RELEASE INFORMATION

I have applied for employment with OCEFCU. As part of the application process OCEFCU may conduct a reference check.

I therefore authorize and request that you furnish relevant, job-related information to OCEFCU and/or its agents in connection with this application.

I release from liability and I agree not to assert any claims or causes of action against all persons, corporations, and organizations supplying this information to OCEFCU and/or its agents. A photocopy of this authorization is as effective as the original.

Click the box to indicate that you have read and accept the authorization section.

CREDIT REPORT DISCLOSURE

Based on Requirements of the Amended Fair Credit Reporting Act Section 604(b)

Orem City Employees Federal Credit Union has determined that information contained in a consumer credit report is relevant to the job for which you are applying. OCEFCU intends to obtain a consumer credit report about you.

You understand that before any adverse actions can be taken against you, based in whole or in part on the credit report, OCEFCU must provide you with a copy of the report and with a written summary of the consumer's rights under the Fair Credit Reporting Act. You understand that your credit report will be used for employment purposes only and will not be used in violation of any applicable federal or state law or regulation.

By clicking below, you acknowledge that you have read and understand this disclosure and you authorize OCEFCU to obtain a consumer credit report about you.

Click the box to indicate that you have read and accept the credit report disclosure section.

BACKGROUND CHECK DISCLOSURE

Authorization to perform a background check

You agree to allow OCEFCU to perform a background check according to the stipulations listed in [this](#) document.

Click the box to indicate you have read and agree to the above disclosure.

