



Do you have any outside duties or responsibilities that may limit you in your work? \_\_\_\_\_

\_\_\_\_\_ Will you consider relocation if it becomes necessary?  Yes  No  
Preferred location of employment \_\_\_\_\_

\_\_\_\_\_ Date available for employment \_\_\_\_\_ Present salary/wage \_\_\_\_\_ Salary/wage requirement \_\_\_\_\_  
(Please identify present and required salary/wage requirement as hourly, monthly, or annual)

Please check if you have training or experience in the following:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Collector              | <input type="checkbox"/> Adding Machine              | <input type="checkbox"/> Typing (speed) _____      |
| <input type="checkbox"/> Teller                 | <input type="checkbox"/> Calculator                  | <input type="checkbox"/> Stenography (speed) _____ |
| <input type="checkbox"/> Telephone Receptionist | <input type="checkbox"/> Bookkeeping Machine         | <input type="checkbox"/> PC: _____                 |
| <input type="checkbox"/> Key punching           | <input type="checkbox"/> Addressing Machine          | Programs _____                                     |
| <input type="checkbox"/> Bookkeeping            | <input type="checkbox"/> Folding & Inserting Machine | _____  |
| <input type="checkbox"/> Accounting             | <input type="checkbox"/> Copy Composing Machine      | _____  |
| <input type="checkbox"/> Data Processing        | <input type="checkbox"/> Dictating Machine           | _____  |

Name of schools attended and location      Dates attended      Did you graduate?      Major studies

High School      From: \_\_\_\_\_  
To: \_\_\_\_\_

College      From: \_\_\_\_\_  
To: \_\_\_\_\_

Graduate School      From: \_\_\_\_\_  
To: \_\_\_\_\_

Special awards, scholarships, honors during schools: \_\_\_\_\_

School Activities: \_\_\_\_\_

List any special programs, seminars, evening classes, etc., you have attended during the past two years: \_\_\_\_\_  
\_\_\_\_\_

Branch of U.S. Military Services:      Dates of Active Duty:      Type of Discharge:      Rank:

From:  
To:

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Special military training: \_\_\_\_\_

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In the event of emergency, notify:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone # \_\_\_\_\_ Home: \_\_\_\_\_  
Work: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If there is any change as to whom you wish to notify in the event of emergency, you must notify your immediate supervisor after employment.

**EMPLOYMENT HISTORY – PLEASE BEGIN WITH PRESENT OR MOST RECENT EMPLOYER**

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1. Company:      Address:      Phone:

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Employed				Starting Salary:	Present / Final Salary:
From:		To:		Per	Per
Month:	Year:	Month:	Year:		

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Your Title:      How did you obtain your position?

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Nature of your work:

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For whom did you work?      His/Her Title:

---

Reason for leaving:

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2. Company:      Address:      Phone:

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Employed				Starting Salary:	Present / Final Salary:
From:		To:		Per	Per
Month:	Year:	Month:	Year:		

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Your Title:      How did you obtain your position?

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Nature of your work:

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For whom did you work?      His/Her Title:

---

Reason for leaving:

---

3. Company:      Address:      Phone:

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Employed				Starting Salary:	Present / Final Salary:
From:		To:		Per	Per
Month:	Year:	Month:	Year:		

---

Your Title:      How did you obtain your position?

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Nature of your work:

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For whom did you work? His/Her Title:

---

Reason for leaving:

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Dates		Company	Address	Your Title
From:	To:			
4				

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5.

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Please circle the number of those employers you do not wish contacted: 1, 2, 3, 4, and 5  
REFERENCES (not relatives) PHONE OCCUPATION

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1.

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2.

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3.

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List names of persons you know who are employed in credit unions or by the WV Central Credit Union

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Additional information about yourself, which will aid in evaluating your career interests and abilities:

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**A background check will be performed on each applicant that would be considered for employment (this would include the following: prior employment, personal references, criminal activity, credit checks, bondability, etc. )**

I hereby certify that the information contained on this application is true and accurate. I authorize the WV Central Federal Credit Union to contact any of my schools or former employers, except those I have indicated, for a complete account of their experience with me. I understand that if I am employed, any misrepresentation of facts on this application form is sufficient cause for dismissal. I also understand that I may be asked to complete a medical examination before employment.

This agreement does not, of course, bind either part to any specific period of employment.

Signature \_\_\_\_\_

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DO NOT WRITE BELOW THIS LINE

Interviewer's remarks:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Interviewed by: \_\_\_\_\_

Starting position: \_\_\_\_\_ Starting date: \_\_\_\_\_

Hours: \_\_\_\_\_ Salary: \_\_\_\_\_ Other Arrangements: \_\_\_\_\_

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**WEST VIRGINIA CENTRAL**  
FEDERAL  
CREDIT UNION

Authorization for Full Background Check

I \_\_\_\_\_ authorize West Virginia Federal Central to complete a full background and credit check.

Name: \_\_\_\_\_ Date \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Social Security \_\_\_\_\_

Birthdate \_\_\_\_\_