

Please give us your employment record, including time in the U.S. military service, if any. Start with your most recent employer. Accuracy of dates is essential. May we contact your present employer? YES NO

Employer, Address, City, State, Zip code (Area Code) Work Phone

Position Supervisor Starting Date Leaving Date Monthly Salary

Former Employer, Address, City, State, Zip code (Area Code) Work Phone

Position Supervisor Starting Date Leaving Date Monthly Salary

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In filing this application for employment, I authorize the Credit Union to inquire in to all statements in this application, with full knowledge that any misrepresentations or omissions of facts will prejudice my application for employment, and may, if I become employed, be sufficient cause for dismissal from the Credit Union. If I should be employed, I agree to abide by all the rules and policies of the Credit Union; and I understand I will be on probation for the first six months of employment. Completion of this application by me or its receipt by the Credit Union does not indicate there are any positions open and does not in any way obligate the Credit Union. I understand that as a part of normal procedure or processing employment applications and employment requests, a routine inquiry may be made concerning information of character, general reputation, credit, personal characteristics, and mode of living. I authorize such investigation and acknowledge that information on the nature and scope of such a report, if one is made, is available upon written request. The Credit Union and its assigned employees or agents may also make any necessary inquiry with governmental authorities concerning my driving records and any reports connected with such records and verify whether I have a valid driver's license. All applicants are hereby notified that employment applications are valid for sixty days. After sixty days, a new application must be completed.

In consideration of my employment, I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Credit Union or me. I understand that no one (other than the President of the Credit Union) has any authority to enter into any agreement which will modify the at will nature of my employment relationship and I further agree that the at will nature of my employment relationship cannot be modified except by an express written agreement signed by the President of the Credit Union and specifically purporting to modify or terminate the at will nature of my employment relationship with the Credit Union.

I, the undersigned, of my own free will and without duress, agree in connection with my employment with the Credit Union to submit to alcohol/drug testing. I agree that the results of alcohol/drug testing will become a part of my employment application and my personnel file in the event I am employed. I understand that these alcohol/drug examinations may be repeated from time to time during my employment and I understand that as a condition of my employment and continued employment, the Credit Union may from time to time, require me to submit to specimens of blood, urine or other bodily fluids for testing to determine the presence of alcohol and controlled substances. I hereby authorize and consent to such testing and do hereby authorize the testing agency to release the results of any such test to the Credit Union. I understand that if I fail to comply with the Credit Union's request in this regard or to furnish the appropriate samples when and as requested I will be subject to immediate termination. I understand that any of my personal items brought into the Credit Union, including lunch boxes, purses, and packages, are subject to search at any time. I also understand that my locker or desk is subject to search at any time. I consent to search or agree to cooperate with the Credit Union if requested. Failure to cooperate in a Credit Union authorized search shall be grounds for immediate termination of employment.

I hereby waive and release any and all claims and causes of action of every kind whatsoever against the Credit Union or any of its officers and employees and any person, firm or corporation engaged by the Credit Union in the taking and maintaining of such alcohol/drug tests, and conducting searches, or from any resulting action or non-action by the Credit Union because of such tests, or in conducting any investigation concerning my background, which I may now or in the future have arising out of or in connection with the aforesaid alcohol/drug tests or investigative procedures.

Signature of Applicant Date Witness

TVA Community Credit Union is an equal opportunity employment company. TVA Community Credit Union is dedicated to a policy of nondiscriminatory employment on any basis including race, creed, color, religion, sex, age, national origin or disability unrelated to job performance.