

PERSONNEL QUALIFICATION RECORD

Name	Social S	Social Security Number		(Area Code) Primary Phone		
Street Address (please do not use P.O. Box)	City	State	Zip	How long have you lived here?		
If less than five years at above address, please	e complete the info	ormation for y	our pre	vious address.		
Previous Street Address (please do not use F	O. Box) City	State	Zip	How long have you lived here?		
Are you at least 16 years of age? YES	☐ NO	Date you can	start w	ork?		
Are you a U.S. citizen? YES NO	O Are	you a permar	nent res	sident? YES NO		
Occupational Preference (check no more that	an two):					
Teller Loan Depart	artment	Colle	ections			
Accounting Marketing)	Othe	er			
Salary Requirements?	Have you ever a	applied with th	nis Cred	lit Union? YES NO		
per month	Date:					
Have you ever worked for a Credit Union?	JYES ∐ NO Ha	ave you ever w	orked f	or this Credit Union? YES NO		
Date: Location:	_			cation:		
Do you have any relatives employed by this						
EDUCATION: School Name and Address High School:	Dates Attended From:	Course of S		Graduate Degree GPA		
riigii school.	rioiii.	Prep	,	∐YES —		
	To:	Vocat	ional	□NO		
College:	From:	Major:		YES		
	То:	Minor:		NO		
Graduate School:	From:	Major:	•	YES		
	То:	Minor:		NO		
Technical School:	From:	Major:		YES		
	То:	Minor:		NO		
Additional Education:	From:	Major:		YES		
	То:	Minor:		NO		
EMPLOYMENT RECORD: (Please state skills you po	ssess and how they	qualify you for a	positio	n at this Credit Union)		

	,	ve contact your present er		•	ostrecent
Employer	Stre	et City	State	Zip	(Area Code) Work Phone
Position	Supervisor	Starting Date	Leaving Date	2	Monthly Salary
Former Employer	Stree	et City	State	Zip	(Area Code) Work Phone
Position	Supervisor	Starting Date	Leaving Date	<u>,</u>	Monthly Salary
Former Employer	Stree	t City	State	Zip	(Area Code) Work Phone
Position	Supervisor	Starting Date	Leaving Date	2	Monthly Salary
Former Employer	Stree	t City	State	Zip	(Area Code) Work Phone
Position	Supervisor	Starting Date	Leaving Date		Monthly Salary
Former Employer	Street	City	State	Zip	(Area Code) Work Phone
Position	Supervisor	Starting Date	Leaving Date	·	Monthly Salary
or omissions of facts will pr be employed, I agree to abition of this application by n understand that as a part o information of character, ge the nature and scope of suc necessary inquiry with gov license. All applicants are h In consideration of my emp at the option of either the C which will modify the at will except by an express writte	ejudice my application for emplide by all the rules and policies one or its receipt by the Credit Urif normal procedure or processing eneral reputation, credit, person chareport, if one is made, is avair and a report, if one is made, is avair mental authorities concerning ereby notified that employment ployment, I agree that my employment, I agree that my employment understand and understand agreement signed by the Present agreement signed by the Present and policies and present agreement signed by the Present and policies and present signed by the Present and policies are a policies and policies	loyment, and may, if I become en of the Credit Union; and I understand on does not indicate there are a neg employment applications and al characteristics, and mode of libiliable upon written request. The neg my driving records and any re tapplications are valid for sixty of the present and compensation can be ded that no one (other than the Present and the presen	nployed, be sufficient caustined I will be on probation open and defended in the probation of the Credit Union of the Credit Union of the at will nature of my eaten.	use for dismisen for the first opes not in an aroutine inquivestigation aroutine inquivestigation aroutine mout cause, and has any autemployment	nd acknowledge that information on yees or agents may also make any id verify whether I have a valid driver's on must be completed. and with or without notice, at any time, uthority to enter into any agreement relationship cannot be modified
that the results of alcohol/c alcohol/drug examinations employment, the Credit Un alcohol and controlled sub- the Credit Union. I underst subject to immediate termi to search at any time. I also requested. Failure to cooper I hereby waive and release person, firm, or cooperation action or non-action by the	wn free will and without duress, drug testing will become a part of may be repeated from time to to ion may from time to time, requistances. I hereby authorize and and that if I fail to comply with to ination. I understand that any of the create in a Credit Union authorize any and all claims and causes of the engaged by the Credit Union is Credit Union because of such to	of my employment application a time during my employment and time me to submit to specimens of consent to such testing and do he the Credit Union's request in this f my personal items brought into lesk is subject to search at any tire ed search shall be grounds for im action of every kind whatsoever the taking and maintaining of	nd my personnel file in the I understand that as a confiblood, urine or other between the testi regard or to furnish the abothe Credit Union, including. I consent to search of mediate termination of exagainst the Credit Union such alcohol/drug tests, as against concerning my basing ation concerning my basing the I was a concerning my basing ation concerning my basing at the Credit Union such alcohol/drug tests, as a concerning my basing at the Credit Union such alcohol/drug tests, as a concerning my basing	ne event I am ondition of modily fluids for ng agency to ppropriate sing lunch bo or agree to com mployment. I or any of its and conducti	or testing to determine the presence of to release the results of any such test to amples when and as requested, I will b exes, purses, and packages, are subject operate with the Credit Union if
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.