

# Application for Employment

**TO APPLICANT:** Missouri Bank is an equal employment opportunity and affirmative action employer. We deeply appreciate your interest in our organization. Thank you for taking the time to complete this application.

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income.

Name: \_\_\_\_\_, \_\_\_\_\_ M.I. \_\_\_\_\_  
*Last* *Full First Name* *Jr., Sr., Etc*

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Phone #: (\_\_\_\_\_) \_\_\_\_\_ Work Phone #: (\_\_\_\_\_) \_\_\_\_\_

1) **Current Address:** \_\_\_\_\_ Apt.# \_\_\_\_\_ City: \_\_\_\_\_

County : \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

2) **Previous Address:** \_\_\_\_\_ Apt.# \_\_\_\_\_ City: \_\_\_\_\_

County : \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

3) **Previous Address:** \_\_\_\_\_ Apt.# \_\_\_\_\_ City: \_\_\_\_\_

County : \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

4) **Driver's License:** State: \_\_\_\_\_ Number: \_\_\_\_\_ Exp: \_\_\_\_\_

**Address** on Driver's License: \_\_\_\_\_

**Name** on Driver's License: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Suffix \_\_\_\_\_

**POSITION(S) APPLIED FOR** \_\_\_\_\_

## EMPLOYMENT HISTORY

1. **Most Recent Employer:** \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_

Address: \_\_\_\_\_ City/ST: \_\_\_\_\_ Phone# (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

**2. Previous Employer:** \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_  
Address: \_\_\_\_\_ City/ST: \_\_\_\_\_ Phone# (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

**3. Previous Employer:** \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_  
Address: \_\_\_\_\_ City/ST: \_\_\_\_\_ Phone# (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

**4. Previous Employer:** \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_  
Address: \_\_\_\_\_ City/ST: \_\_\_\_\_ Phone# (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Dates Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

*I hereby give permission to contact the employers listed above concerning my prior work experience as indicated below.*

Employer 1?	Yes	No
Employer 2?	Yes	No
Employer 3?	Yes	No
Employer 4?	Yes	No

Signed \_\_\_\_\_

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**EDUCATION**

School	Name & Location / Address	Years Attended	Date Completed	Degree / Program
High School				
College				
Trade or Other				

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**PERSONAL REFERENCES** (Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number

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**GENERAL QUESTIONNAIRE – Please answer all questions**

1) How were you referred here? \_\_\_\_\_ 2) Are you at least 18 Years of Age: Yes \_\_\_ No \_\_\_

3) What date will you be available to work? \_\_\_\_\_ 4) Do you have a valid Driver's License? Yes \_\_\_ No \_\_\_

5) Have you ever been convicted of a criminal offense? Yes \_\_\_ No \_\_\_ if yes, offense: \_\_\_\_\_

6) If #5 is yes, place of conviction: County: \_\_\_\_\_ State: \_\_\_\_\_ Mo/Yr: \_\_\_\_\_ - \_\_\_\_\_

7) List any special skills that qualify you for this position:

\_\_\_\_\_

8) May we telephone you to follow up on this application at home? Yes \_\_\_ No \_\_\_

9) If yes, what is the best time to call? \_\_\_\_\_

10) May we telephone you to follow up on this application at work? Yes \_\_\_ No \_\_\_

11) If yes, what is the best time to call? \_\_\_\_\_

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**APPLICANT AUTHORIZATION**

All information I have submitted in this application is true & correct to the best of my knowledge. I understand that false Information will be cause for dismissal. I hereby authorize this company and ACS Data Search the right to process this application and to verify all information herein, including conducting a background check for Criminal Record, Police Record and Motor Vehicle record information. Additionally, I authorize all corporations, companies, academic institutions, law enforcement agencies, and current and former employers to release information they may have about me and release them from any liability or responsibility from doing so

I hereby state that I am a prospective employee and authorize this company or its agent(s) to obtain my abstract of driver record from the appropriate state agency, to be used exclusively by said company or its agent to determine whether I should be employed to operate a motor vehicle upon the public highways of the state and or for the purpose of underwriting insurance in connection with such employment. I further understand that no information contained in the driver record shall be divulged, sold, assigned, or otherwise transferred to a third person or party.

I authorize this company or agent to use electronic means, such as email, to communicate the contents of this release or report to company or agent.

I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the Company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing signed by an officer.

The undersigned agrees that this application and any information reports will remain the property of ACS Data Search. A photographic, faxed, or electronic copy of this authorization shall be as valid as the original.

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

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

Signature: \_\_\_\_\_



Name: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ City, St Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (For Identification purposes only)

In compliance with the **FAIR CREDIT REPORTING ACT** this notice is to inform you that the processing of this application includes but is not limited to making any inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from Consumer Credit Reporting Agencies and obtaining credit information from other Credit institutions for the purpose of obtaining employment. A copy of this report will be mailed to you by the reporting credit bureau.

The undersigned is the person named above and hereby authorizes ACS Data Search to obtain such credit reports and information.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed

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## EQUAL EMPLOYMENT OPPORTUNITY DATA

### VOLUNTARY APPLICANT SELF-ID FORM

Missouri Bank is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, Missouri Bank invites applicants to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. This detachable form will be kept in a confidential file separate from your application for employment. When reported, data will not identify any specific individual.

<b>Name:</b>		<input type="checkbox"/> <b>Male</b>
		<input type="checkbox"/> <b>Female</b>
<b>Location:</b>	<b>Position Applied For:</b>	
<b>Date:</b>	<b>Referral Source:</b>	
<b>Race and Ethnic Identification:</b>		
Are you Hispanic or Latino? ( <i>Hispanic or Latino is defined as a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.</i> )		
<input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>		
If your answer to the previous question was "no," please identify what race(s) you consider yourself to be:		
<input type="checkbox"/> <b>White (Not Hispanic or Latino)</b> - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.		
<input type="checkbox"/> <b>Black or African American (Not Hispanic or Latino)</b> - A person having origins in any of the black racial groups of Africa.		
<input type="checkbox"/> <b>Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)</b> - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.		
<input type="checkbox"/> <b>Asian (Not Hispanic or Latino)</b> - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.		
<input type="checkbox"/> <b>American Indian or Alaska Native (Not Hispanic or Latino)</b> - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.		
<input type="checkbox"/> <b>Two or More Races (Not Hispanic or Latino)</b> - All persons who identify with more than one of the above five races.		
<b>Decline Self Identification: If you do not wish to self identify, please check the box below.</b>		
<input type="checkbox"/> I do not wish to provide this information.		