

EMPLOYMENT APPLICATION



It is the policy of Nova Credit Union to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

COMPLETE, PRINT, MAIL OR FAX

Mail to: **Nova Credit Union**
Attn.: Careers
3601 Mulberry Church Rd.
Charlotte, NC 28208

Fax to: **(704) 392-4489**

APPLICANT INFORMATION Please print or type, completing all information.

Last Name		First Name		Middle Initial	Social Security Number	
Home Address			City		State	ZIP Code
How Long at Current Address?	Home Phone Number		Mobile Phone Number		Email Address	
Driver License or State ID Number	Driver License or State ID Issuing State					

EMERGENCY CONTACT

Contact Name			Relationship to You			
Address			City		State	ZIP Code
Home Phone Number	Mobile Phone Number					

JOB POSITION

Job Position Applied For <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time			Salary Desired <input type="checkbox"/> Hourly <input type="checkbox"/> Annual			
Who Referred You to Our Company?		Do You Have Any Friends or Relatives Who Work Here? If Yes, Please List Names <input type="checkbox"/> Yes <input type="checkbox"/> No				
If You Are Offered Employment, When Would You be Available to Begin Work?		If Hired, Are You Able to Submit Proof That You Are Legally Eligible for Employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				

EMPLOYMENT HISTORY

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, please attach a separate page.

Employer #1		Dates of Employment (Month/Year to Month/Year)		Supervisor's Name	
Employer's Address			City		State ZIP Code
Position/Job Title		Job Duties		Reason for Leaving	
Employer #2		Dates of Employment (Month/Year to Month/Year)		Supervisor's Name	
Employer's Address			City		State ZIP Code
Position/Job Title		Job Duties		Reason for Leaving	
Employer #3		Dates of Employment (Month/Year to Month/Year)		Supervisor's Name	
Employer's Address			City		State ZIP Code
Position/Job Title		Job Duties		Reason for Leaving	

Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

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SKILLS

List any skills that may be useful for the job you are seeking. Enter the number of years of experience, and check the number which corresponds to your ability for each particular skill (1 = Poor, 2 = Fair, 3 = Good, 4 = Very Good, 5 = Exceptional).

Skill	Years of Experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
Skill	Years of Experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
Skill	Years of Experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5
Skill	Years of Experience	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5

EDUCATION

College/University	Address	Did You Receive a Degree? If Yes, List Degree(s) Received <input type="checkbox"/> Yes <input type="checkbox"/> No
College/University	Address	Did You Receive a Degree? If Yes, List Degree(s) Received <input type="checkbox"/> Yes <input type="checkbox"/> No
High School	Address	Did You Receive a Diploma or GED? <input type="checkbox"/> Yes <input type="checkbox"/> No
Other Training (Graduate, Technical, Vocational)		

Please Indicate Any Current Professional Licenses or Certifications That You Hold

Please List Your Awards and Special Achievements

Did You Serve in the United States Military? If Yes, Please Indicate Branch and Any Specialized Training

Yes No

REFERENCES Include Non Relatives

Reference #1 Name	Relationship	Phone Number	Email Address	
Employer's Address	City	State	ZIP Code	
Reference #2 Name	Relationship	Phone Number	Email Address	
Employer's Address	City	State	ZIP Code	
Reference #3 Name	Relationship	Phone Number	Email Address	
Employer's Address	City	State	ZIP Code	

CERTIFICATION AND SIGNATURE

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Nova Credit Union to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its CEO, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Nova Credit Union, except in a specific written contract of employment signed on behalf of the organization by its CEO, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

Applicant's Signature	Date
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