Employment Application

San Diego County Credit Union®
sdccu.com®

To be sure your application is properly evaluated, all questions should be answered as carefully and completely as possible, even if a resume will accompany this application. If you need more space for your answers, please attach a separate sheet.

In compliance with federal and state equal employment opportunity laws, qualified applicants are considered for the position(s) indicated on the employment application without regard to any characteristic or condition protected by federal state, or local law.

Please read prior to completing application.

Sign your approval below.

I understand and agree that:

1. I certify that answers given herein are true and complete to the best of my knowledge. Any untrue statement or omission of fact in my application may be justification for refusal of employment, or if employed, termination from employment.

2. San Diego County Credit Union® (SDCCU®) will make a thorough investigation of all data provided on my application for employment, related papers, or oral interviews. I authorize such investigation and the giving and receiving of any information requested by the company. I release from liability any person giving or receiving such information.

3. As a condition of employment, and upon written authorization of the applicant, a record of certain criminal convictions will be provided to SDCCU by a third party agency. The following information will be excluded from consideration: (a) any arrest or detention that did not result in conviction; (b) any conviction for which the record has been judicially ordered sealed, expunged or statutorily eradicated; (c) any misdemeanor conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed pursuant to Penal Code section 1203.4; (d) any arrest for which a pretrial diversion program has been successfully completed pursuant to Penal Code sections 1000.5 and 1001.5; (e) a conviction that is more than two years old for marijuana-related offenses under sections 11357(b), 11357(c), 11360(c), 11364, 11365 or 11550 of the California Health and Safety Code; and (6) any other offense prohibited from consideration by applicable state or federal law. *Convictions involving dishonesty, breach of trust, moral turpitude, and offenses that are job related will be considered but will not automatically disqualify you for employment. You will be given the opportunity to explain any convictions which may adversely impact your application for employment.*

4. Falsification of data provided herein or other disqualifying information discovered as a result of this investigation may prevent my being hired, or if hired, may subject me to immediate termination.

5. If hired by SDCCU, business needs may at times make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a work schedule other than Monday through Friday.

6. If federal or state regulations, insurance companies, or SDCCU rules establish special requirements for this job, I may be required to furnish proof of age, driver license, or other pertinent information.

7. If hired by SDCCU, my employment will be for an unspecified term and at the mutual consent of myself and SDCCU. I also understand and agree that this means that my employment with SDCCU, if hired, will be at-will and that either SDCCU or I may terminate my employment at any time, for any reason, with or without cause, and with or without advance notice. This at-will employment status unless may not be changed by any conduct, statement, or document, unless such change is expressly acknowledged in a writing signed by the President & Chief Executive Officer of SDCCU and me.

I further understand that this is an application for employment and that no employment contract is being offered. If I am employed, such employment will be “at will,” which means that I or SDCCU may terminate the employment relationship at any time, with or without any reason, and with or without advance notice.

I have read, understand, and agree with the statements contained above.

_____ _____

APPLICANT’S SIGNATURE **DATE**

APPLICATION FOR EMPLOYMENT

PLEASE PRINT CLEARLY IN INK

San Diego County Credit Union®
sdccu.com®

Date _____

LAST NAME	FIRST	MIDDLE		SALARY DESIRED
STREET ADDRESS	CITY STATE ZIP CODE		HOME PHONE	BUS/MESSAGE/CELL PHONE
BRANCH/DEPARTMENT LOCATION	POSITION(S) APPLYING FOR		☐ Part Time ☐ Full Time	AVAILABILITY DATE

DAYS AND HOURS AVAILABLE Branch Positions: Full-time staff must be available to work shifts on the following days: Monday-Thursday 8:30 to 5:30, Friday 8:30 to 5:30 or 9:30 to 6:30, and Saturdays 8:30 to 4:30

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
From: To:	From: To:	From: To:	From: To:	From: To:	From: To:

EDUCATION	HIGH SCHOOL ☐ Yes ☐ No	COLLEGE 1 – 2 – 3 – 4	GRADUATE 1 – 2	CURRENTLY ENROLLED ☐ Yes ☐ No	
NAME OF SCHOOL	**LOCATION** (City & State)	**DEGREE OR DIPLOMA RECEIVED**	**SCHOLASTIC AVERAGE**	**MAJOR**	**MINOR**
HIGH SCHOOL					
COLLEGE/UNIVERSITY					
GRADUATE SCHOOL					
OTHER (Trade School)					

EMPLOYMENT RECORD List present or most recent experience first. Account for all employment and any periods of unemployment during the past ten (10) years. Include armed services and volunteer work if relevant to the position(s) for which you are applying (you may omit activities that would reveal race, color, religion, sex, gender identity or expression, sexual orientation, marital status, medical condition, national origin, citizenship, age, mental or physical disabilities, genetic information, veteran or any other protected status under federal, state or local law). If more space is necessary, attach a separate sheet of paper.

EMPLOYER	PHONE ( )			FROM: TO:	
ADDRESS	CITY	STATE	ZIP	POSITION	☐ Part Time ☐ Full Time
DUTIES				SUPERVISOR'S NAME	
REASON FOR LEAVING			☐ Voluntary ☐ Involuntary	STARTING PAY: FINAL PAY:	Hr/Mo/Yr Hr/Mo/Yr
MAY WE CONTACT YOUR CURRENT EMPLOYER? ☐ Yes ☐ No					

EMPLOYER	PHONE ( )			FROM: TO:	
ADDRESS	CITY	STATE	ZIP	POSITION	☐ Part Time ☐ Full Time
DUTIES				SUPERVISOR'S NAME	
REASON FOR LEAVING			☐ Voluntary ☐ Involuntary	STARTING PAY: FINAL PAY:	Hr/Mo/Yr Hr/Mo/Yr

EMPLOYER	PHONE ( )			FROM: TO:	
ADDRESS	CITY	STATE	ZIP	POSITION	☐ Part Time ☐ Full Time
DUTIES				SUPERVISOR'S NAME	
REASON FOR LEAVING			☐ Voluntary ☐ Involuntary	STARTING PAY: FINAL PAY:	Hr/Mo/Yr Hr/Mo/Yr

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HAVE YOU EVER BEEN BONDED? ☐ YES ☐ NO

IF HIRED, COULD YOU PROVIDE PROOF THAT YOU ARE AT LEAST 18 YEARS OF AGE? ☐ YES ☐ NO

HAVE YOU EVER BEEN INVOLUNTARILY TERMINATED FROM ANY TYPE OF EMPLOYMENT? ☐ YES ☐ NO

IF YES, PLEASE EXPLAIN:_____

_____

HAVE YOU EVER FILED AN APPLICATION OR BEEN EMPLOYED AT SDCCU BEFORE? ☐ YES ☐ NO

IF YES, PLEASE LIST NAME EMPLOYED UNDER:_____

HAVE YOU EVER WORKED OR ATTENDED SCHOOL UNDER A DIFFERENT NAME? ☐ YES ☐ NO

IF YES, PLEASE LIST OTHER NAMES:_____

IF HIRED, COULD YOU PROVIDE PROOF OF LEGAL AUTHORIZATION TO WORK IN THE UNITED STATES? ☐ YES ☐ NO

ARE YOU CURRENTLY OUT ON BAIL OR ON YOUR OWN RECOGNIZANCE PENDING TRIAL FOR A PRIOR ARREST? ☐ YES ☐ NO

HAVE YOU EVER BEEN CONVICTED OF ANY CRIME? *(Please omit any information concerning: (a) any arrest or detention that did not result in conviction; (b) any conviction for which the record has been judicially ordered sealed, expunged or statutorily eradicated; (c) any misdemeanor conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed pursuant to Penal Code section 1203.4; (d) any arrest for which a pretrial diversion program has been successfully completed pursuant to Penal Code sections 1000.5 and 1001.5; and (e) a conviction that is more than two years old for marijuana-related offenses under sections 11357(b), 11357(c), 11360(c), 11364, 11365 or 11550 of the California Health and Safety Code.)* ☐ YES ☐ NO

IF YES, STATE THE NATURE OF THE CRIME(S), WHEN AND WHERE CONVICTED, AND DISPOSITION OF THE CASE:_____

_____

_____

Please note: Conviction does not automatically disqualify you from employment. The nature of the crime for which you were convicted, the length of time since that conviction, and periods of rehabilitation are important. Provide all relevant facts so that a decision can be made.

CAN YOU TRAVEL, IF REQUIRED BY THE JOB? ☐ YES ☐ NO

CAN YOU WORK OVERTIME, SHIFT WORK, A ROTATING WORK SCHEDULE, OR SATURDAY HOURS? ☐ YES ☐ NO

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION(S) FOR WHICH YOU HAVE APPLIED, WITH OR WITHOUT REASONABLE ACCOMMODATIONS? ☐ YES ☐ NO

PLEASE INDICATE YOUR YEARS OF EXPERIENCE WITH THE FOLLOWING:

Personal Computer: _____ Word: _____ Excel: _____ Internet: _____ 10-Key: _____ Symitar: _____

BRIEFLY DESCRIBE HOW YOU ARE QUALIFIED FOR THIS POSITION BY VIRTUE OF YOUR INTEREST, APTITUDE, EDUCATION AND EXPERIENCE:

_____

_____

_____

PROFESSIONAL REFERENCES

PLEASE PROVIDE US WITH NAMES OF INDIVIDUALS WITH WHOM YOU HAVE WORKED WITHIN THE PAST (PREFERABLY SUPERVISORS & MANAGERS). DO NOT INCLUDE RELATIVES.

NAME_____

HOW DO YOU KNOW THIS PERSON?_____

_____

HOME ( ) _____ BUS ( ) _____

NAME_____

HOW DO YOU KNOW THIS PERSON?_____

_____

HOME ( ) _____ BUS ( ) _____

NAME_____

HOW DO YOU KNOW THIS PERSON?_____

_____

HOME ( ) _____ BUS ( ) _____

NAME_____

HOW DO YOU KNOW THIS PERSON?_____

_____

HOME ( ) _____ BUS ( ) _____

I CERTIFY THAT ALL STATEMENTS CONTAINED HEREIN ARE TRUE AND COMPLETE.

Applicant's Signature _____ *Date*_____

Referred By: ☐ Classified Newspaper ☐ Employee Referral (Name and Relationship)_____

☐ Employment Agency ☐ In-Branch Advertisement ☐ Internet: _____ ☐ Other: _____