



# APPLICATION FOR EMPLOYMENT

With

Walworth State Bank

(The "Company")  
An Equal  
Opportunity Employer

| FOR OFFICE USE ONLY |            |
|---------------------|------------|
| Work Location _____ | Rate _____ |
| Position _____      | Date _____ |

This application will be held in the active file for \_\_\_\_\_ days. If you wish to be considered after that date, please recontact us.

(PLEASE PRINT PLAINLY)  
PERSONAL

Date \_\_\_\_\_

Name \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Telephone No. \_\_\_\_\_

Present Address \_\_\_\_\_ No. \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security No. \_\_\_\_\_

Are you legally eligible for employment in the U.S.A.? \_\_\_\_\_ (If you are hired, federal law requires that you provide documentation of your identity and eligibility for employment and that you attest to your eligibility for employment.)

If you are under age 18, state your age \_\_\_\_\_, and whether you can provide a work permit \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_

Would you work Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_

**The Company is an equal opportunity employer. The Company does not discriminate in hiring or employment on the basis of race, color, creed, national origin, marital status, sex, sexual orientation, ancestry, age, against qualified individuals with a disability, qualified disabled veterans, veterans of the Vietnam era, or other eligible veterans, or on the basis of arrest or conviction record except where the circumstances make the applicant unacceptable to a surety company or the circumstances of the offense are substantially related to the circumstances of the particular position. It is the Company's policy to comply with all laws prohibiting discrimination.**

**This application will be given every consideration, but its receipt does not imply that the applicant will be employed. One of the factors in determining whether an applicant will be employed is that the Company, at its own expense, arranges for a surety bond for its employees who are required by law to be bonded. Unless the applicant's background is acceptable to a surety company, the Company may be unable to offer employment.**

### EDUCATION

| School          | Name and Address of School | Course of Study | Circle Last Year Completed |    |    |    | Did You Graduate? | List Diploma or Degree | Grade Point Average |
|-----------------|----------------------------|-----------------|----------------------------|----|----|----|-------------------|------------------------|---------------------|
|                 |                            |                 | 9                          | 10 | 11 | 12 |                   |                        |                     |
| High            |                            |                 |                            |    |    |    |                   |                        |                     |
| College         |                            |                 |                            |    |    |    |                   |                        |                     |
| Other (Specify) |                            |                 |                            |    |    |    |                   |                        |                     |
| Other (Specify) |                            |                 |                            |    |    |    |                   |                        |                     |
| Other (Specify) |                            |                 |                            |    |    |    |                   |                        |                     |

Courses now studying: \_\_\_\_\_

List courses you have completed which will aid the Company in evaluating your qualifications for the position you are applying for. Use additional sheets if necessary. (Example: If applying for a clerical position, note training such as word processing, typing, bookkeeping, computer/CRT.) Please include grade or other indicator of achievement, such as words per minute typed.

| COURSE | DATES ENROLLED IN COURSE | SCHOOL OR OTHER SPONSOR OF COURSE | DESCRIBE MAJOR CONTENT OF COURSE | GRADE |
|--------|--------------------------|-----------------------------------|----------------------------------|-------|
|        | FROM<br>TO               |                                   |                                  |       |
|        | FROM<br>TO               |                                   |                                  |       |
|        | FROM<br>TO               |                                   |                                  |       |
|        | FROM<br>TO               |                                   |                                  |       |

**GENERAL INFORMATION**

[Note: When completing this application, your responses to inquiries about organizations and activities should not be revealing as to race, color, creed, national origin, age, marital or Vietnam veteran status, sex, sexual orientation, disability or ancestry.]

List relevant scholastic honors, offices held, and relevant activities in high school or college:

Use the space below to describe your activities, skills and aptitudes that you believe would reasonably bear on your qualification for the position you are applying for at the Company. [You may wish to include civic and community activities, professional societies relating to the specific position for which you are applying in which you participate, special training or skills such as typing, accounting/bookkeeping, shorthand, computer/CRT machine, word processing or other skills.] If you need more space, please continue on a separate sheet.

Have you been employed here previously?  Yes  No      Have you ever applied here before?  Yes  No

Have you ever been convicted of a criminal offense?  Yes  No

(Note: A conviction does not automatically disqualify an applicant from employment. What you were convicted of and how long ago are important.) If the answer is "yes," then for each such conviction, indicate (a) the date(s) of conviction, (b) the nature of the offense, (c) the penalty imposed, (d) whether the offense involved a financial institution, and (e) the circumstances involved. Exclude any arrest(s), acquittal(s), conviction(s) reversed on appeal, conviction(s) that have been completely expunged, and/or any adjudgment(s) against you by a court as a "youthful offender" or "juvenile delinquent."

Do you have any charges pending against you?

(Note: A pending charge does not automatically disqualify an applicant from employment. The type of charge(s) and the surrounding circumstances are important.) If the answer is yes, indicate the pending charge(s) and surrounding circumstances:

Have you entered into a pretrial diversion or similar program relating to any criminal offense ("program entry")?  Yes  No

(Note: For purposes of this inquiry, "program entry" is defined as suspension or eventual dismissal of charges or criminal prosecution upon agreement to enter into treatment, rehabilitation, restitution, or other noncriminal or nonpunitive alternatives. Entry into such a program does not automatically disqualify an applicant from employment. The nature of the program and how long ago are important.)

For each such "program entry," indicate (a) the date(s) you entered into the program, (b) the nature of the offense, (c) whether you completed the required treatment, rehabilitation, restitution, or other alternatives, (d) the ultimate disposition of the charges, and (e) the circumstances involved. Exclude any program entries prior to November 29, 1990.

Has a surety bond ever been refused to you? \_\_\_\_\_ For a position for which a surety bond is a requirement: If yes, indicate when and the surrounding circumstances: \_\_\_\_\_

List below all present and past employment, beginning with your most recent position.

| DATES | NAME AND ADDRESS OF EMPLOYER | DESCRIBE THE WORK YOU DID | SALARY | EXACT REASON FOR LEAVING |
|-------|------------------------------|---------------------------|--------|--------------------------|
| From: |                              |                           | From:  |                          |
| To:   |                              |                           | To:    |                          |
| From: | Telephone:                   | Supervisor:               | From:  | May we contact them?     |
| To:   |                              |                           | To:    |                          |
| From: | Telephone:                   | Supervisor:               | From:  | May we contact them?     |
| To:   |                              |                           | To:    |                          |
| From: | Telephone:                   | Supervisor:               | From:  | May we contact them?     |
| To:   |                              |                           | To:    |                          |
| From: | Telephone:                   | Supervisor:               | From:  | May we contact them?     |
| To:   |                              |                           | To:    |                          |

If you need more space to list all of your present and past employment, please continue on a separate sheet.

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

| Name and Occupation | Address | Phone Number | No. of years you have known reference |
|---------------------|---------|--------------|---------------------------------------|
|                     |         |              |                                       |
|                     |         |              |                                       |
|                     |         |              |                                       |
|                     |         |              |                                       |
|                     |         |              |                                       |

AGREEMENT

PLEASE READ BEFORE SIGNING. If you have any questions regarding this Agreement, please ask them of a personnel officer before signing.

In order that the Company may arrive at an employment decision, I understand that the Company may do any or all of the following, and I hereby consent to the same:

1. Investigate all statements contained in this application for employment.
2. Request that I be fingerprinted.

I understand that if I receive an offer of employment I may be required to undergo a medical examination conducted by a doctor of the Company's choice, and to submit to drug and alcohol screening tests. I also understand that my employment may be conditioned on the results of that examination and these tests.

If employed, as a condition of continued employment, I agree to submit to drug screening tests from time to time, if requested to do so by the Company. I understand that failure to cooperate with the testing may be grounds for dismissal.

In the event that I am employed by the Company:

1. I will comply with all rules and policies of the Company, including a request for a current personal photograph meeting the Company's specifications; and

2. I understand that my employment can be terminated at any time, with or without cause, either at my option or that of the Company; I understand that no personnel recruiter, interviewer or other representative of the Company other than the President has any authority to enter into any agreement for employment for any specified period of time; I also understand that any employment manuals or handbooks that may be distributed to me during the course of my employment shall not be construed as an employment contract.

I certify that the answers and information given in this employment application are true and correct to the best of my knowledge. If I am hired, I understand that false or misleading information given in my application or interviews is grounds for discharge from employment.

Date \_\_\_\_\_ Signature \_\_\_\_\_

FOR COMPANY USE ONLY (To be filled in AFTER applicant is hired or refused employment)

Date employment refused \_\_\_\_\_

Date employed \_\_\_\_\_ Date of Birth \_\_\_\_\_  Salaried  Hourly

Department \_\_\_\_\_ Social Security No. \_\_\_\_\_

Job Title \_\_\_\_\_ Work Schedule (Hrs., Days, etc.) \_\_\_\_\_

Job No. \_\_\_\_\_

Maiden Name \_\_\_\_\_

In case of accident or other emergency who is the first person we should contact?

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone \_\_\_\_\_ (Home) \_\_\_\_\_ (Business)

Address \_\_\_\_\_ (Number) \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State)

Address \_\_\_\_\_ (Place of Work) \_\_\_\_\_ (City) \_\_\_\_\_ (State)