



## Job Application

As an equal opportunity employer, First Federal Community Bank firmly adheres to a policy of recruiting, hiring, training, assigning, and promoting employees without regard to race, color, sex, age, disability, religion, national origin, military/veteran status, genetic information, gender identity, sexual orientation, ancestry, or any other characteristic protected by applicable federal or state law.

Personal Information							
Last	First	MI	SSN#		Email		
Street Address		City	ST	Zip	Home Phone	Mobile	
Are you a U.S. citizen or otherwise authorized to work in the United States?			Are you 18 or older?				
Yes ___ No ___			Yes ___ No ___				
Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?							
Yes ___ No ___							
What position are you applying for?				How did you hear about this position?			
Expected Hourly Rate	Expected Weekly Earnings		Date Available				
Ever applied to this company before?	Where?		When?				
Yes ___ No ___							
Ever worked for this company before?	Where?		When?				
Yes ___ No ___							

Prior Work Experience	Current		Prior		Prior	
Employer						
Address						
City, State, Zip						
Telephone						
Dates of Employment	From	To	From	To	From	To
Name of Immediate Supervisor						
Position/Job Title						
Description of Work						
Pay						
Reason for Leaving						
May we contact?						

Please explain any gaps in employment.

Have you ever been disciplined, involuntarily terminated, or asked to resign by any employer because of workplace violence, abusive conduct, dishonesty, or theft? Yes\_\_\_\_ No\_\_\_\_

If yes, please explain:



Education	Name and Location	Last Year Completed	Degree	Major
High School		9 10 11 12		
College/University		1 2 3 4		
Trade School				
Other				
List any applicable special skills, training or proficiencies.				

Please provide professional references from business associates or former supervisors. These references may not be related to you.

Professional References	Address	Business	Years Acquainted

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

Return to: Human Resources  
First Federal Community Bank  
119 S. Sandusky Ave.  
Bucyrus, Ohio 44820  
419-562-7055  
[hr@ffcb.com](mailto:hr@ffcb.com) or upload this form  
securely through our website.  
<https://ffcb.com/Contact-Us>

## ACKNOWLEDGMENT AND AUTHORIZATION

Please read carefully, initial each paragraph and sign below.

### TRUTHFULNESS OF INFORMATION

I certify that the answers given by me on this application for employment with First Federal Community Bank are true, correct and complete, to the best of my knowledge. I understand that any misstatement, misrepresentation, or omission of facts on this application or any documents used to obtain employment may result in rejection of this application or immediate discharge if I am employed, regardless of the time elapsed before discovery of the misstatement or omission. I further certify that I, the applicant, have personally completed this application.

Initials \_\_\_\_\_

### AUTHORIZATION OF DISCLOSURES

I authorize the Bank to investigate my references, prior employment, work record, education, and other matters related to my suitability for employment and, further, authorize the references that I have listed, all prior employers, and all educational institutions attended, to disclose to the Bank any letters, reports, and other information related to my records, including, but not limited to, my performance reviews and evaluations, discipline, commendations, awards, and all other employment information, without giving me prior notice of that disclosure. I understand and agree that they may express their opinions about me and my past or future performance. By providing this page of the application to the references, prior employers, and educational institutions attended, I release them, and their employees, managers, executives, board members, agents, or other representatives, to the fullest extent permitted by law, from any claims and liabilities for providing the Bank with all information, and I release the Bank and its employees, managers, executives, board members, agents or other representatives, to the fullest extent permitted by law, from any and all claims, and liabilities that may result from any use or disclosure of such information by the Bank or any of its employees, managers, executives, board members, agents, or other representatives.

Initials \_\_\_\_\_

### BACKGROUND CHECK

I understand that any offer of employment is contingent upon my submission to and successfully passing a background check. I agree to complete any required authorization forms for the background check.

Initials \_\_\_\_\_

### COMPLIANCE WITH RULES, REGULATIONS, POLICIES, AND PROCEDURES

If I become employed, in consideration of my employment, I agree to comply with the rules, regulations, policies, and procedures of the Bank.

Initials \_\_\_\_\_

### ACCOMMODATION OF DISABILITIES

If hired by the Bank, I understand that it is my responsibility to inform the Bank if I have any limitations that affect my ability to perform the essential functions of my job, and to request any reasonable accommodation that may be necessary.

Initials \_\_\_\_\_

### AT-WILL EMPLOYMENT

If hired, I agree that the Bank can terminate my employment and compensation at its will for any reason or no reason, except an illegal reason, with or without cause, at any time, with or without advance notice or warning, and that the Bank's decision is not subject to review outside the Bank (except as may be provided by applicable law). I understand and agree that no employee, manager, executive, agent, board member, or any other representative of the Bank, other than the president, has any authority to enter into any agreement for employment for any specified period of time or terminable for cause or to make any oral or written representation or agreement or to establish any practice contrary to at-will nature of my employment relationship with the Bank. I further understand and agree that only an agreement in writing expressly for the purpose of modifying the at-will nature of my employment and signed by me and the president of the Bank can modify the at-will nature of my employment. I understand and agree that no other oral or written statement, policy, or practice and no provision of the Bank can change the at-will nature of my employment.

Initials \_\_\_\_\_

I also understand and agree that, by signing this application, I would be accepting employment, if hired, on the terms set forth in this application and that my acceptance of such employment would supersede, revoke, cancel, and negate any prior statements, agreements, practices, policies, and representations, oral or written, if any, that the Bank would employ me on any terms other than the terms set forth in this application.

Initials \_\_\_\_\_

#### **DOCUMENTATION AND CERTIFICATION OF AUTHORIZATION TO WORK IN USA**

I certify that I am legally authorized to work in the United States for any U.S. employer. I understand that any offer of employment is conditional upon my ability to provide documents required by the Immigration Reform and Control Act of 1986 proving both my identity and authorization to work in the United States, and that failure to produce the documents will result in revocation of the offer or the termination of employment. I certify that I am able to provide documents that demonstrate my identity and work eligibility and that I will assist the Bank in completing Form I-9 Employer Verification.

Initials \_\_\_\_\_

#### **EXPIRATION OF APPLICATION**

This application will be null and void after 90 days if the Bank does not hire me, and I will need to re-apply if I want to be considered for employment after the 90-day expiration of this application.

Initials \_\_\_\_\_

**By signing below, I certify that all the information I have provided on this application is true, accurate, and complete, and I have read, understand, and agree to the above statements. I also understand and agree that, by signing this application, I would be accepting employment, if hired, on the terms set forth in this application and that my acceptance of such employment would supersede, revoke, cancel, and negate any prior statements, agreements, practices, policies, and representations, oral or written, if any, that the Bank would employ me on any terms other than the terms set forth in this application.**

\_\_\_\_\_

Printed Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date