

EMPLOYMENT APPLICATION									
Please fill in all areas requested and sign the application. Applicants or Employees may be tested for illegal substances. We are an Equal Opportunity Employer who does not discriminate on the basis of race, color, age, gender, religion, disability, national origin or any protected class or characteristic. Consistent with the American with Disabilities Act (ADA), please request any accommodation necessary for the application for employment process.									
How Did You Hear About Us?									
Advertisement Relative/Friend Inquiry Internet Other									
Name: Date:									
LAST FIRST M. INITIAL									
Present Address : NUMBER STREET NAME CITY STATE ZIP									
Do you own or rent your current residence? Own Rent									
Home Phone: Work Phone: Cell Phone:									
Position applied for:									
 Essential Functions: The positions of employment at LRRCU require that, at a minimum, all employees be able to: 1. Speak, read, write & understand English, 2. Be able to follow written/oral instructions, 3. Maintain good personal hygiene & grooming habits, 4. Acquire & maintain all required licenses & certifications, 									
 Frequire communicate effectively with co-workers and members, including have the ability to hear sufficiently, Be able to stand, sit or walk for long periods, Be able to bend, crawl, stoop, Be able to lift 15 lbs in weight, Have vision correctable to 20/20, Have hearing at normal hearing standards, Have manual dexterity in all 10 fingers, and Be able to effectively operate and see a computer, Have vehicle or other insurance at required levels as the position requires. Based on the Essential Functions above, do you require "reasonable accommodation" under the ADA in order to perform the work of any of Lancaster Red Rose Credit Union's positions? If so, what reasonable accommodation? 									
Can you perform the essential functions of the job for which you are applying, either with or without a reasonable accommodation? YES or NO									
Salary desired: M T W TH F Sat Sun HOURS AVAILABLE									
Type of employment:Full-TimeorPart-TimeDate available to start work:Are you currently on "lay off" status and subject to recall?YesNoHave you ever applied with LRRCU before?YesNoIf yes, for what position/on what date?									
Have you ever been fired from another position?YesNoIf so, for what Company and why?									
Are you 18 years of age?YesNo									

RED ROSE										
Are you a U.S. Citizen? Yes No Are you legally eligible to work in the U.S.? Yes No Do you currently have any licenses or certifications in PA? Yes No										
EDUCATION										
Type of School	Name of School		Address Yea		Completed	Major/Degree				
	I CHARGED WIT	H A FELONY A		2 OP ANY CI						
HAVE YOU EVER BEEN CHARGED WITH A FELONY, MISDEMEANOR OR ANY CRIMINAL OFFENSE: NO YES HAVE YOU EVER BEEN CONVICTED OF A FELONY, MISDEMEANOR OR ANY CRIMINAL OFFENSE: NO YES If the answer is yes, please explain the offenses charged or convicted, the date, the sentence imposed, and/or other pertinent information										
Specialized Skills:	PC/MAC	QuickBooks	Spreadsheet							
			EXPERIENC							
PLEASE FILL IN A Employer Name, Address & Telephone			LL AREAS REQUESTED Name of Supervisor		Employment Date	es Salary				
	Position Title & Duties									
Reason for leaving (speci	fically)									
Employer Name, Address & Telephone			Name of Supervisor		Employment Date	es Salary				
			Position Title & Duties							
Reason for leaving (specifically)										
Employer Name, Address & Telephone		Name of Supervisor		Employment Date	es Salary					
			Position Title & Duties							
Reason for leaving (speci	fically)		I							
May we contact your prese	ent employer?		YES	NO (If no	t, please tell us why?	")				
Did you complete this application yourself?			YES NO If not, name of person who did:							
Have you ever been in the U.S. Armed Forces? YES NO										
If so, please list the l	-		-	ties:						
If discharged from the U.S. Armed Forces, were you honorably discharged? YES NO If no, please explain:										



CREDIT UNION		DEEDE	NOTO								
REFERENCES LIST THE INFORMATION FOR THREE (3) REFERENCES FOR PERSONS NOT RELATED TO YOU WHOM YOU HAVE											
REPORTED OF				ER YOU FOR AT LE	AST 1 YEA	AR.					
Name	Phone Number	E-mail Address		Relationship		Job Title of Reference					
	DRIVER	'S LICENSI	E INFORMA	TION							
Do you have a current, valid		YES NO		PA license, put State:							
Has your driver's license eve		YES NO If yes, please		·							
	-			-							
Driver's License No.		State Issued		Expiration Date		Class					
Do you have valid vehicle in	surance? YES	NO If yes, 1	name of insurer:								
Policy number of insurer:											
Have you had any motor veh	nicle accidents in the last	three (3) years	? YES	NO How Many:							
Please describe the circumst	ances and if you were cit	ted as a result:									
Have you had any moving v	iolation in the last three ((3) years?	YES NO	If yes, how many:							
I certify that the facts conta understand that any false info employed by Lancaster Red at the time such is discovered	ormation, omission or mi Rose Credit Union, no r	isrepresentatior	n may be cause for	or refusal to hire or ter	mination, or	if I have been					
I authorize LRRCU to conta thoroughly investigate and p employment history, my edu employment with LRRCU. examinations/tests if a job examination.	perform background/crim acational history, charact I authorize and agree th	inal backgroun er, and any oth at LRRCU <u>ma</u>	d/credit checks a er necessary info y ask me to par	as necessary to obtain ormation in order to de rticipate in a Drug &	information etermine my Alcohol tes	regarding my suitability for and physical					
I understand and agree th employment contract, unle that, if hired, my employm or prior notice, at the optic	ess a contract is memori lent is "at will" and wit	alized in writi hout fixed terr	ng and signed b	y all relevant parties.	I understa	and and agree					
I understand that completing agree to abide by all LRRC whole or in part, at any time	U work rules, policies a										

DATE: ______ SIGNATURE OF APPLICANT: _____