



DAKOTA PRAIRIE BANK

YOUR LAND. YOUR COMMUNITY. YOUR BANK.

Member FDIC

APPLICATION FOR EMPLOYMENT

Dakota Prairie Bank is a friendly and locally owned bank and we appreciate your interest in employment with us. Our mission is to provide quality services that meet the needs and goals of our customers in order to promote the growth and development of the people we serve.

All applications are considered for employment without regard to race, color, sex, age, religion, or national origin. Qualified handicapped individuals, disabled veterans, and Vietnam-era veterans are considered equally with other applications.

Information on this application is strictly confidential. In addition to enabling us to evaluate you as a prospective employee, it will also serve as a permanent record should you be employed. This application should be filled out completely and accurately.

“AN EQUAL OPPORTUNITY EMPLOYER”

Applicant Information:

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: () _____ E-mail Address: _____

Date Available: _____ Social Security No: _____ Minimum Salary Expected: \$ _____

Position Applied for: _____

How did you learn about us?

____ Advertisement ____ Friend (name) _____
____ Employment Agency ____ Relative (name) _____
____ Walk-in ____ Other

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever been convicted of a felony or misdemeanor other than a minor traffic accident? YES NO

If yes, state offense(s), date(s), location(s):

Do you have any friends or relatives working at this bank? ____yes ____no

If Yes, Name: _____ Relationship: _____

Do you want to work: Full -time ____ Part-Time ____ Temporary ____?

If Part-time indicate hours you are available to work:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
AM						
PM						

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Date of Discharge: _____

List duties, special training or skills, commendations/recognitions: _____

Educational Background

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? ___yes ___no Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? ___yes ___no Degree: _____

Trade/
Technical: _____ Address: _____

From: _____ To: _____ Did you graduate? ___yes ___no Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? ___yes ___no Degree: _____

Are you planning to further your education? ___yes ___no
If yes, when? _____ In what area? _____

Indicate any extracurricular activities in which you participated during school and any awards or special recognition you may have received during school or activities and recognition since leaving school.

Check any of the following in which you have experience or training and indicate skill level attained

___ Typing ___ wpm ___ Adding Machine ___ Sight ___ Touch

___ Stenography ___ wpm ___ Calculator ___ Sight ___ Touch

___ Teller Machine ___ Proof Machine ___ Sight ___ Touch

___ CRT

___ Personal Computer

Office Software:

List Product Name:

___ Word Processing

___ Spreadsheet

___ Other

Employment History

List below all present and past employment, beginning with you most recent employment, for the last year or years worked if less than 10 years. (Include self-employment, summer, and part-time employment.)

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____
YES NO

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____
YES NO

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____
YES NO

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: (____) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

YES NO

May we contact your previous supervisor for a reference?

If presently employed, why do you wish to change your position?

Use the space below to describe the skills and personal attributes that you feel qualify you for a position with our bank. Please tell why you are interested in being employed with this bank.

Personal References

List three references, preferably people with knowledge of your training, experience and capability. (Non-relatives only, please.)

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____



PLEASE READ THE FOLLOWING CONDITIONS OF EMPLOYMENT AND CERTIFY BY YOUR SIGNATURE THAT YOU UNDERSTAND AND AGREE TO THESE CONDITIONS.

The answers given by me in this application are true and correct without any consequential omissions of any kind. It is agreed and understood that completion of this application does not mean a job opening exists and in no way obligates Dakota Prairie Bank to employ me. I agree to hold Dakota Prairie Bank, its agents, officers, directors, and employees harmless from all claims and liability associated in any way with the decision whether or not to employ me and from all claims, damages, losses and expenses, arising out of compliance with this request. I agree that Dakota Prairie Bank shall not be liable in any respect if my employment is terminated because of misstatements, wrong answers, or omissions made by me.

I agree to submit to any pre-employment testing that Dakota Prairie Bank may utilize in its pre-employment screening process, which may include an observed drug screening examination. I authorize Dakota Prairie Bank to obtain and review any records public, private, confidential, or sealed which may include information as to my employment history, background, credit report, and criminal history necessary in arriving at an employment decision.

I authorize you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damages according to any state or federal laws. I release you, as the custodian of the records, from all liability for damages of any kind which may result to me, my heirs, family or associates because of compliance with this authorization or any attempt to comply with it.

I agree to comply with all rules and regulations of Dakota Prairie Bank, and I agree that I have the right to terminate my employment at any time, as does Dakota Prairie Bank. I understand that the terms of my employment cannot be altered except by the President or the Board of Directors, and such agreement must be in writing.

Date: _____

Signature _____ of _____ applicant:

Name _____ (please _____ print):

Social Security Number: _____