

APPLICATION FOR EMPLOYMENT

512 Paseo del Pueblo Sur
 PO Box 818, Taos, NM 87571
 (575) 758-6700
 www.centinelbank.com



GENERAL

LAST NAME		FIRST NAME		M.I.
MAILING ADDRESS		CITY	STATE	ZIP CODE
PHYSICAL ADDRESS		CITY	STATE	ZIP CODE
TELEPHONE NUMBER(S): (H) _____ (C) _____	BEST TIME TO CONTACT YOU: _____ am/pm	EMAIL ADDRESS:		SOCIAL SECURITY NUMBER:
TODAY'S DATE:	POSITION APPLYING FOR:	HOW DID YOU HEAR ABOUT POSITION?	DATE AVAILABLE:	
HAVE YOU APPLIED FOR EMPLOYMENT WITH US BEFORE? <input type="checkbox"/> Yes _____ (Date) <input type="checkbox"/> No	ARE YOU APPLYING FOR: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Student-Intern	DESIRED WAGE/SALARY RANGE:		
HAVE YOU BEEN EMPLOYED BY US BEFORE? <input type="checkbox"/> Yes _____ (Date) <input type="checkbox"/> No	ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> Yes <input type="checkbox"/> No		ARE YOU AVAILABLE TO WORK WEEKENDS? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a citizen of the United States ? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, are you eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If you are under 18 years of age, can you provide required proof of your eligibility to work? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?				
Have you ever been convicted of or plead guilty to a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:				
Please list names and relationships of relatives or acquaintances employed by Centinel Bank.				

EDUCATION & TRAINING

LEVEL	NAME AND LOCATION	GRADUATE	GPA	MAJOR OR DEGREE(S) EARNED
HIGH SCHOOL:		<input type="checkbox"/> YES <input type="checkbox"/> NO		
COLLEGE/ UNIVERSITY:		<input type="checkbox"/> YES <input type="checkbox"/> NO		
OTHER SCHOOL(S) OR TRAINING:		<input type="checkbox"/> YES <input type="checkbox"/> NO		
List any additional training, academic achievements, advanced study, or extracurricular activities relevant to the job for which you are applying. Exclude any information which may indicate age, sex, race, religion, color, national origin, handicap, political affiliation, and/or union membership.				

MILITARY

BRANCH OF SERVICE:	DATES OF SERVICE:	STARTING RANK:	SEPARATION RANK:
DUTIES IN SERVICE:			

OFFICE SKILLS

Please list specialized office or computer skills (i.e. Microsoft Applications, Banking Software, etc.):

EMPLOYMENT HISTORY

Beginning with your most recent position, list all employment history from the past ten years.
If you need additional space, continue on a separate sheet of paper and attach it to your application.

NAME OF EMPLOYER:	DATE STARTED:	ENDING DATE:	STARTING POSITION:	PRESENT OR FINAL POSITION:	EMPLOYER TELEPHONE NUMBER:
ADDRESS (CITY AND STATE):	STARTING SALARY:	PRESENT/FINAL SALARY:	NAME AND TITLE OF SUPERVISOR:		MAY WE CALL YOU AT THIS NUMBER? Yes <input type="checkbox"/> No <input type="checkbox"/>
REASON FOR LEAVING OR DESIRE TO LEAVE:					MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> Later
MAJOR RESPONSIBILITIES, DUTIES AND EXPERIENCE (INDICATE LENGTH OF TIME OR FREQUENCY):					

NAME OF EMPLOYER:	DATE STARTED:	ENDING DATE:	STARTING POSITION:	PRESENT OR FINAL POSITION:	EMPLOYER TELEPHONE NUMBER:
ADDRESS (CITY AND STATE):	STARTING SALARY:	PRESENT/FINAL SALARY:	NAME AND TITLE OF SUPERVISOR:		MAY WE CALL YOU AT THIS NUMBER? Yes <input type="checkbox"/> No <input type="checkbox"/>
REASON FOR LEAVING OR DESIRE TO LEAVE:					MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> Later
MAJOR RESPONSIBILITIES, DUTIES AND EXPERIENCE (INDICATE LENGTH OF TIME OR FREQUENCY):					

NAME OF EMPLOYER:	DATE STARTED:	ENDING DATE:	STARTING POSITION:	PRESENT OR FINAL POSITION:	EMPLOYER TELEPHONE NUMBER:
ADDRESS (CITY AND STATE):	STARTING SALARY:	PRESENT/FINAL SALARY:	NAME AND TITLE OF SUPERVISOR:		MAY WE CALL YOU AT THIS NUMBER? Yes <input type="checkbox"/> No <input type="checkbox"/>
REASON FOR LEAVING OR DESIRE TO LEAVE:					MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> Later
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ADDRESS (CITY AND STATE):	STARTING SALARY:	PRESENT/FINAL SALARY:	NAME AND TITLE OF SUPERVISOR:		MAY WE CALL YOU AT THIS NUMBER? Yes <input type="checkbox"/> No <input type="checkbox"/>
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REASON FOR LEAVING OR DESIRE TO LEAVE:					MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later
MAJOR RESPONSIBILITIES, DUTIES AND EXPERIENCE (INDICATE LENGTH OF TIME OR FREQUENCY):					
LIST ALL SPECIAL JOB SKILLS OR QUALIFICATIONS YOU CONSIDER RELEVANT TO THE POSITION FOR WHICH YOU ARE APPLYING:					

PROFESSIONAL REFERENCES

List three non-friend or family members and describe their relation to you

NAME	RELATION	YEARS KNOWN	OCCUPATION	TELEPHONE NUMBER	ADDRESS

CENTINEL BANK IS AN EQUAL OPPORTUNITY EMPLOYER

PLEASE READ THE FOLLOWING AND SIGN BELOW

I acknowledge that the facts set forth on this application are true and complete. I understand that if employed, any false statement or omission on this application or any attachment shall be sufficient cause for dismissal.

I authorize Centinel Bank of Taos to use its personnel or any investigative agency to investigate my employment record, education, criminal conviction record and financial record before or at any time during my employment. I also authorize all my employers and former employers, references, credit reporting agencies/bureaus, educational institutions and any other person's contacted by Centinel Bank of Taos representatives to provide all records and information relevant to my employment application with Centinel Bank of Taos.

I release all parties who provide such records or information from all liabilities arising from such disclosures, and waive any rights to notice of such disclosures.

I authorize Centinel Bank of Taos to copy this document and agree that such copies with my signature shall have the same legal force and effect as the original document with my signature.

SIGNATURE _____

DATE _____

FOR HUMAN RESOURCE USE ONLY	
Date Application Received by Human Resources:	_____
Action Taken:	<input type="checkbox"/> Entered into Evolution <input type="checkbox"/> Interview <input type="checkbox"/> Decline <input type="checkbox"/> Hire

CENTINEL BANK OF TAOS
Authorization to Obtain Credit Information

I, _____ authorize Centinel Bank of Taos to obtain credit information based on the information I have provided within this application. I understand that this information will be kept confidential.

SIGNATURE _____

DATE _____