



125 Front St.  
Bath, Maine 04530

We are pleased that you are interested in applying for a position with First Federal Savings. This institution does not discriminate in hiring or employment based on of race, color, religious creed, national origin, sex, or ancestry; or based on age against persons whose age is between 40 and 70 or based on a handicap not limiting the applicant's ability to perform satisfactorily the job available. No question on this form is intended to secure information to be used for such discrimination.

We will give this application thoughtful attention. However, in accepting it the Institution makes no commitment of employment to the applicant.

**BASIC INFORMATION:** Please PRINT IN INK

Name: \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ Are you a United States Citizen: YES / NO

Position Applied For: \_\_\_\_\_ Location: \_\_\_\_\_

Salary Requirements: \_\_\_\_\_ Date Available: \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

Do you have any physical or mental limitation which would limit you in the performance of the job for which you are applying? If so, please explain: (From this section on, please write in your normal handwriting.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WORK HISTORY:** Start with your present or most recent job. List self-employment, summer, and part-time jobs. Include employers located in the United States only.

|  |  |             |
|--|--|-------------|
| <b>Company 1:</b>                              | Address:                                       | Telephone:  |
| Date Employed:<br>From                      To | Starting Salary:                      Leaving: | Supervisor: |
| Your Duties:                                   |  |             |
| Reason for Leaving:                            |  |             |

|  |  |             |
|--|--|-------------|
| <b>Company 2:</b>                              | Address:                                       | Telephone:  |
| Date Employed:<br>From                      To | Starting Salary:                      Leaving: | Supervisor: |
| Your Duties:                                   |  |             |
| Reason for Leaving:                            |  |             |

|  |  |             |
|--|--|-------------|
| <b>Company 3:</b>                              | Address:                                       | Telephone:  |
| Date Employed:<br>From                      To | Starting Salary:                      Leaving: | Supervisor: |
| Your Duties:                                   |  |             |
| Reason for Leaving:                            |  |             |

|  |  |             |
|--|--|-------------|
| <b>Company 4:</b>                              | Address:                                       | Telephone:  |
| Date Employed:<br>From                      To | Starting Salary:                      Leaving: | Supervisor: |
| Your Duties:                                   |  |             |
| Reason for Leaving:                            |  |             |

May we contact the above employers for reference checking purposes: YES / NO

Please identify by number any employer you do not wish us to contact. \_\_\_\_\_

**MACHINE OPERATION:** Check the following machines, which you can operate.

- Typewriter \_\_\_\_\_ WPM                       Other  
 Computer  
 Adding Machine

**EDUCATION**

| Name                    | Address | Major/<br>Course/<br>Subject | Circle Last<br>Year<br>Completed | Month<br>and Year<br>Graduated | Degree |
|-------------------------|---------|------------------------------|----------------------------------|--------------------------------|--------|
| High School/Preparatory |         |                              | 1 2 3 4                          |                                |        |
| Business School         |         |                              | 1 2 3 4                          |                                |        |
| College                 |         |                              | 1 2 3 4                          |                                |        |
| Graduate Work           |         |                              | 1 2 3 4                          |                                |        |
| Other (Describe)        |         |                              |                                  |                                |        |

If you did not graduate, why did you leave school or college? \_\_\_\_\_

Are you planning to pursue further studies? YES / NO                      Day School \_\_\_\_\_ Night School \_\_\_\_\_

If so, when, where and what course? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INTERESTS:** Use the space below to describe your interest in the financial industry and the skills and activities that you feel qualify you for a position at First Federal Savings. (You may wish to include civic and community activities, professional societies in which you participate, hobbies, sports, special training, or skills such as typing, accounting and the like.) If you need more space, please continue on a separate sheet.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES:** Please list the names and addresses of two personal references, excluding relatives and former employers.

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**CONVICTIONS:** Have you ever been convicted of any crime involving dishonesty, breach of trust or theft? If so, please explain.

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**CERTIFICATION AND ASSENT**

I hereby certify that the statements I have made are true, and, if I am subsequently employed by you, that I may be subject to discharge if they are found to be false. I agree to a physical examination by a doctor of First Federal Savings' choice. I also understand that employment may be conditional upon securing and retaining a surety bond, issued by a company selected by First Federal Savings.

I hereby acknowledge that I have read the above statement and understand the same.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
First Federal Savings Representative

\_\_\_\_\_  
Date

**INVESTIGATIVE CONSUMER REPORT**

In connection with my application for employment, I hereby consent to First Federal Savings procuring or causing to be procured and "Investigative Consumer Report" which will be compiled from personal interviews with my neighbors, friends, associates, or others as to my character, general reputation, personal characteristics, or mode of living. I am aware that I have a right to make a written request within a reasonable time to receive additional detailed information as to the nature and scope of the investigation.

I hereby acknowledge that I have read the above statement and understand the same.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
First Federal Savings Representative

\_\_\_\_\_  
Date

**AUTHORIZATION TO RELEASE CREDIT REPORT**

To Potential Employees of First Federal Savings and Loan Association of Bath:

Please be advised that First Federal Savings and Loan Association of Bath may request a consumer report regarding your credit history as part of our standard employment process. The report is to be used only as part of the employment application process. Under the guidelines of the Fair Credit Reporting Act (10 M.R.S.A. § 1313-A), we cannot obtain a credit report without your written authorization. If you agree to allow First Federal Savings and Loan Association of Bath to review your credit history, please sign and complete the below section.

I have read and understood the above statement. I understand that First Federal Savings and Loan Association of Bath is prohibited from obtaining a consumer credit report without my written authorization. I hereby authorize First Federal Savings and Loan Association of Bath to obtain a copy of a report concerning my credit history.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth