



Employment Application

An Equal Opportunity Employer

Please Print

Date Last Name First Name Middle

Present Address

No. & Street City State Zip

Permanent Address (if different from present address)

No. & Street City State Zip

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Business Phone Home Phone

Employment Desired

Position applying for: _____

What days and hours are you available to work: _____

Would you be available to work overtime, if necessary: Yes _____ No _____

If hired, what date are you available to start work: _____ Salary desired: _____

Personal Information

How did you hear about our company and this job opening? _____

Have you ever applied to or worked for Chino Commercial Bank before? Yes No

If yes, when? _____

Do you have any friends or relatives working for Chino Commercial Bank? Yes No

If yes, state name(s) and relationship:

Why are you applying for work at Chino Commercial Bank?

If hired, would you have a reliable means of transportation to and from work? Yes No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.) Yes No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.

Are you currently employed: Yes _____ No _____

If yes, may we contact your current employer: Yes _____ No _____

Education, Training, and Experience

		# of years <u>Completed?</u>	Did you <u>Graduate?</u>	Degree or <u>Diploma?</u>
High School	Name and Address	_____	___ Yes ___ No	_____
College/ University	Name and Address	_____	___ Yes ___ No	_____
Vocational/ Business	Name and Address	_____	___ Yes ___ No	_____
Graduate School	Name and Address	_____	___ Yes ___ No	_____

Do you have any other experience, job related skills, training, additional languages or other qualifications that you believe should be considered in evaluating your qualifications for employment.? Yes _____ No _____

If so, please explain: _____

If the position requires a license or certification, do you have one: Yes _____ No _____

Name of license/certification: _____ Issue Date: _____

Has your license/certification ever been suspended or revoked: Yes _____ No _____

If yes, state the reason: _____

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer

(____) ____ - ____
Telephone No.

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip

Dates of Employment: _____
From To

Your Position and Duties

Reason for Leaving

May we contact this employer for a reference? Yes No

Name of Employer

(____) ____ - ____
Telephone No.

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip

Dates of Employment: _____
From To

Your Position and Duties

Reason for Leaving

May we contact this employer for a reference? Yes No

Have you ever been involuntarily terminated or asked to resign from any job?..... Yes No
If yes, please explain:

Please explain any gaps in your employment history:

