

Employment Application

An Equal Opportunity Employer

Please Print

Date	Last Name	First Name		Middle	
Present Address					
No. & Street Permanent Address	(if different from present a	City address)	State	Zip	. <u></u>
No. & Street		City	State	Zip	
()	_ ()				
Business Phone	Home Phone				
Employment Desi	red				
Position applying for	or:				
What days and hour	rs are you available to wor	k:			
Would you be avail	able to work overtime, if n	ecessary: Yes No			
If hired, what date a	are you available to start w	ork:Salary	desired:		
Personal Informat	ion				
•		s job opening?			
		Commercial Bank before?	_		Yes 🗌 No 📋
	iends or relatives working ame(s) and relationship:	for Chino Commercial Bank?			Yes 🗌 No 🗌
Why are you apply	ing for work at Chino Com	mercial Bank?			
If hired, would you	have a reliable means of tr	ansportation to and from work?			Yes 🗌 No
•	•	re is subject to verification that you			Yes 🗌 No
		. citizenship or proof of your legal			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 _____

		# 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	
	Name and Address		Yes	No	
School Do you have believe shou	any other experience, job rel ld be considered in evaluating	g your qualifications for	ditional languag r employment.?	es or other Yes	No
School Do you have believe shou	any other experience, job rel	g your qualifications for	ditional languag r employment.?	es or other Yes	No
School Do you have believe shou If so, please	any other experience, job rel ld be considered in evaluating	g your qualifications for	ditional languag r employment.?	es or other Yes	No
School Do you have believe shou If so, please	any other experience, job rel ld be considered in evaluating explain:	g your qualifications for	ditional languag r employment.?	es or other Yes	No
If so, please	any other experience, job rel ld be considered in evaluating explain: n requires a license or certific	g your qualifications for	ditional languag r employment.?	es or other Yes	No

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.	_	
True of Duringer	V		
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	
ing we contact and employer for a ference :			
Have you ever been involuntarily terminated or a	asked to resign from any job	?YesNo	
If yes, please explain:			
Please explain any gaps in your employment his	tory:		

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

			_() _		
First Name	Last Name		Telephone	No.	
Address & Street		City		State	Zip
Occupation		No. of Years acqu	ainted		
First Name	Last Name		() Telephone I	 No.	
Address & Street		City		State	Zip
Occupation		No. of Years acqu	ainted		
First Name	Last Name	() Telephone I	– No.	
Address & Street		City		State	 Zip
Occupation		No. of Years acqu	ainted		

Please Read Carefully, Initial Each Paragraph and Sign Below

	I hereby certify that I have not knowingly withheld any information that might adversely affect my
Initials	chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. I hereby authorize Chino Commercial Bank to thoroughly investigate my references,
Initials	work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
	I understand that nothing contained in the application, or conveyed during any interview which may
Initials	be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.
.	In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the
Initials	Union States and to complete the required employment eligibility verification document form upon hire. Should a search of public records (including records documenting an arrest, indictment, conviction,
Initials	 civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below. I waive receipt of a copy of any public record described in the paragraph above.

Additional Employers

			()			
Name of Employer			Telephone No.			
Type of Business			Your Supervisor's Name			
Address & Street			City	State	Zip	
Dates of Employment	nt:	·				
	From	То				
Your Position and Duties						
Reason for Leaving						
May we contact this	employer for a	reference?			☐ Yes	s 🗌 No
Name of Employer			() Telephone No.			
Name of Employer Type of Business			()	_		
			-		Zip	
Type of Business	nt:		Your Supervisor's Name		Zip	
Type of Business Address & Street	nt: From	To	Your Supervisor's Name		Zip	
Type of Business Address & Street	From		Your Supervisor's Name		Zip	
Type of Business Address & Street Dates of Employmen	From		Your Supervisor's Name		Zip	