



Employment Application

Applicant Information

Full Name: Last First M.I. Date:

Address: Street Address Apartment/Unit # City State ZIP Code

Phone: Email

Date Available: Social Security No.: Desired Salary:\$

Position Applied for:

Have you ever worked for this company? YES NO If yes, when?

Education

High School: Address:

College: Address:

From: To: Did you graduate? YES NO Degree:

Other: Address:

From: To: Did you graduate? YES NO Degree:



Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

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

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge, and that I am legally authorized to work in the United States.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Flanagan State Bank provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability or genetics. In addition to federal law requirements, Flanagan State Bank complies with applicable state and local laws governing nondiscrimination in employment in every location in which the company has facilities. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training. Flanagan State Bank expressly prohibits any form of workplace harassment based on race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, genetic information, disability, or veteran status. Improper interference with the ability of Flanagan State Bank’s employees to perform their job duties may result in discipline up to and including discharge.*

**DISCLOSURE AND AUTHORIZATION TO PROCURE A  
CONSUMER REPORT AND/OR AN INVESTIGATIVE CONSUMER  
REPORT UNDER THE FAIR CREDIT REPORTING ACT**

The Fair Credit Reporting Act (15 U.S.C. §§ 1681-1681u) requires any person procuring a consumer report for employment purposes to provide written notification to the consumer of this intent before attempting to procure the consumer report and/or investigative consumer report.

This notice is provided to inform you that Flanagan State Bank will procure a consumer report and/or an investigative consumer report on you for employment purposes, including hiring, promotion, demotion, or termination purposes. If your application for employment is granted, Flanagan State Bank may obtain further consumer reports and/or investigative consumer reports from time to time for employment purposes so as to update, renew, or extend your employment.

A consumer report is any report (whether written, oral, or through other communication) of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living. Flanagan State Bank will notify you upon your written request of whether Flanagan State Bank received a consumer report on you and if so, the name and address of the consumer reporting agency that furnished the report.

An investigative consumer report involves obtaining information by personal interviews with acquaintances or associates or others with whom you are acquainted or who may have knowledge concerning your character, general reputation, personal characteristics or mode of living. Flanagan State Bank will notify you upon your written request of whether Flanagan State Bank received an investigative consumer report on you and if so, the name and address of the consumer reporting agency that furnished the report as well as the nature and scope of any such report.

By signing this disclosure and acknowledgment, you hereby: (1) authorize Flanagan State Bank to obtain a consumer report and/or an investigative consumer report on you for employment purposes, (2) acknowledge that you have received a summary of your rights under the Fair Credit Reporting Act, and (3) verify that you have read and understood this disclosure and acknowledgment.

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Signature

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Date

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Name (please print)

Para información en español, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington DC 20552.

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.
- In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For Information about your Federal rights contact:**

<b>TYPE OF BUSINESS:</b>	<b>CONTACT:</b>
<p>1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center PO Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut St., Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement &amp; Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area Supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8<sup>th</sup> Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which the creditor operates <u>or</u> Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 (877) 382-4357</p>

## DRUG-FREE WORKPLACE POLICY

The Bank strives to provide a safe work environment and encourages good personal health habits. Alcohol and drug abuse pose a threat to the health and safety of employees and to the security of our equipment and facilities. Use of alcohol or drugs by our employees can also influence our customers' confidence in us. For these reasons, the Bank is committed to the elimination of drug and/or alcohol use and abuse in the workplace. Therefore, we have established the following policy about the use, possession, or sale of drugs and alcohol.

The following definitions apply:

**Legal drug** – prescribed drug(s) or over-the-counter drug(s) that have been legally obtained and are being used for the purpose for which they were prescribed and manufactured.  
**Pursuant to federal law, Medical Marijuana is NOT classified as a Legal drug.**

**Illegal drug** – any drug: (a) that is not legally obtainable; (b) that may be legally obtainable, but has not been legally obtained; or (c) that is being used in a manner or for a purpose other than as prescribed or directed.

The Bank's policy is to employ a workforce free from the use and effects of illegal drugs and the abuse of alcohol during working hours. Any employee found to be in violation of this policy is subject to disciplinary action, up to and including termination, even for the first offense. To implement this policy, the Bank has established and will maintain the programs and rules set forth below.

### General Procedures

To ensure compliance with this policy, substance abuse screening may be conducted in the following situations:

**Pre-employment:** As required by the company for all prospective employees who receive a conditional offer of employment.

**For Cause:** Upon reasonable suspicion that the employee is under the influence of alcohol or drugs that could affect or has adversely affected the employee's job performance. Any employee who reports to work while impaired or who is unable to properly perform their required duties may not continue to work. The Bank reserves the right to require a drug screen where allowed by law and it has reasonable suspicion that an employee is under the influence of illegal drugs while in the workplace.

**Random:** As authorized or required by federal or state law.

Compliance with this policy is a condition of employment. Employees who test positive or who refuse to submit to substance abuse screening will be subject to termination. Notwithstanding any provision herein, this policy will be enforced at all times in accordance with applicable state and local law.

Prescription drugs prescribed by the employee's physician, or other legal drugs, may be taken during work hours. However, if the use of any prescribed drug will affect an employee's safe work performance, the employee should notify their supervisor to determine if accommodations can be made. We will not



tolerate the abuse of prescription drugs and we will address such abuse in the same manner as for illegal drugs.

### **Grounds for Termination or Discipline**

An employee is in violation of the Substance Abuse policy for illegal drug use or for alcohol abuse if the employee:

- brings onto the Bank's premises or property, has possession of, is under the influence of, or has any detectable amount of an illegal drug in his or her system as determined by drug or alcohol testing;
- uses, consumes, transfers, sells, or attempts to sell or transfer any form of illegal drug, as defined above, while on Bank business or at any time during the hours between the beginning and ending of the employee's work day - whether on duty or not;
- is under the influence of alcohol at any time while on Bank business;
- is under the influence of alcohol at any time during the hours between the beginning and ending of the employee's workday.

The violating employee is subject to disciplinary action up to and including discharge or suspension without pay, even for the first offense.

### **Failure to Consent to Tests**

Failure to consent to drug tests requested by the Bank is a violation of this policy and is grounds for discharge.

### **Authority**

Only the Bank's President, Executive Vice President or the HR Manager is empowered to request drug or alcohol testing or to impose termination under the above Drug-Free Workplace policy.

**PRE-EMPLOYMENT DRUG/ALCOHOL TESTING  
CONSENT AND RELEASE FORM**

I hereby consent to submit to a drug or alcohol test and to furnish a sample of my urine, breath, and/or blood for analysis, as shall be determined by Flanagan State Bank ("the Company") in order to meet with their policy regarding the selection of applicants for employment.

I further authorize and give full permission to have the Company and/or its authorized agents and physicians to send the specimen or specimens so collected to a laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to the Company. I further agree to and hereby authorize the release of the results of said tests to the Company.

I understand that it is the current use of illegal drugs that would prohibit me from being employed at this Company.

I further agree to hold harmless the Company and its agents and physicians from any liability arising in whole or part, out of the collection of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my application of employment.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the attached Drug-Free Workplace Policy and the foregoing contents of this form and fully understand the contents of these documents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

APPLICANT:

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_