

APPLICATION FOR EMPLOYMENT

Alva State Bank & Trust Company is an equal employment opportunity employer dedicated to a policy of non-discrimination in employment based upon an individual's race, color, creed, religion, age, sex, national origin, ancestry, marital status, sexual orientation, or the presence of any non-job-related medical condition or disability. In reading and answering the following questions, please keep in mind that none of the questions are intended to imply any limitations, illegal preferences, or discrimination based upon any non-job-related information. This application will be given consideration, but its receipt does not imply or guarantee an interview or employment.

Please contact the Human Resources at (580) 327-3300, if you need an accommodation to participate in the application process.

РО	POSITION APPLYING FOR: DATE AVAILABLE:							
BR	ANCH LOCATION(S):	□ALVA □FIRST ST	□ENID ATE BANK OF		NGTON Part Time	_	OF FREED e First Av	
PERSONAL DATA								
Name								
Ad	dress Street Address		City			State	Zip	_
	Daytime Phone		Cell Phone		E-Mail A	Address		_
GENERAL INFORMATION 1. Have you ever applied for a job with this company in the past? If yes, please give the date of YesNo application and position for which you applied. State your name at that time, if different								
2.	Have you ever been emp employment, position(s)	oloyed by the B	Bank in the past?	If yes, please g	give dates of different from		Yes _	_No
3.	If hired, will you be able required for the position(explain:	to work Mono	day-Saturday, du	ring the normal		urs	Yes _	_No
4.	Do you have any commit the bank?If yes, please ex					nent with	Yes	_ No
5.	If hired, can you furnish permit to work? If no, pl						Yes	_ No
6.	If hired, can you furnish of the documents needed requirements.) If no, ple	to prove eligil	bility to work in	the U.S., we wa	ill explain the		Yes	_ No

7.	Have you been convicted of a felony or released from prison in the past 7 years? (Note: A yes answer does not automatically disqualify you from employment since the nature of the offense, date, and type of job for which you are applying will be considered.) If yes, please explain:							
8.	8. Are you charged with an unresolved criminal charge (have you been charged with a crime that has not yet resulted in a plea of guilty, court trial, or dropping of the charge)? (Note: A yes answer will not automatically disqualify you from employment.) If yes, please explain:							
DO	NOT ANSWER QUEST	IONS 9 OR 10 IF A JOB DESCRI	IPTION IS NOT	ATTACHED				
9.	Are you able to perform the tasks listed on the attached job description with or without an YesNo accommodation?							
10.	10. If necessary, what accommodation could we make that would allow you to perform the Yes No essential functions of the job?							
EDUCATIONAL DATA								
\$	SCHOOLS ATTENDED	NAME OF SCHOOL AND LOCATION	DID YOU GRADUATE?	DEGREE/ DIPLOMA/ CERTIFICATE	MAJOR COURSE OF STUDY			
	HIGH SCHOOL	CIRCLE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7 8 9 10 11 12	YES NO					
	TECHNICAL, OCATIONAL BUSINESS, R MILITARY TRAINING		YES NO					
	COLLEGE OR UNIVERSITY		YES NO					
	GRADUATE SCHOOL		YES NO					
PRO	OFESSIONAL SEMINARS							
Add	litional JOB-RELATED se	eminars, short courses, workshops, o	r other educationa	l experiences:				
	3-RELATED certificates, li other JOB-RELATED spe	icenses, equipment qualified to operacial skills and abilities:	ate, computer hard	lware and softwar	e operated,			

EMPLOYMENT HISTORY - List Present or Most Recent First Attach additional sheet if necessary. Dates of Employment Company Name From To Address Supervisor City, State, Zip Your name when employed, if different from present Job Title & Duties Reason for leaving Final Salary: \$___ _____per___ Phone Number May we contact? ___Yes ___No Dates of Employment Company Name From To Address Supervisor City, State, Zip Your name when employed, if different from present Job Title & Duties Reason for leaving Final Salary: \$_____per____ Phone Number May we contact? ___Yes ___No Company Name Dates of Employment From To Address Supervisor City, State, Zip Your name when employed, if different from present Job Title & Duties Reason for leaving Final Salary: \$_____ _ per _ Phone Number May we contact? ___Yes ___No Please account for any time you were not employed after leaving school in the past ten years (you need not list any unemployment periods of one month or less) Time Period(s) Reason(s) for Unemployment

If you were unable to list all past jobs or periods of unemployment on this form, please use an additional sheet.

REFERENCES - List three (3) business-related individuals who are familiar with your work or education experience. (Please DO NOT list family members, personal friends or relatives.) **NAME ADDRESS** CITY, STATE, ZIP PHONE NO. OCCUPATION OTHER JOB-RELATED EXPERIENCE. Some people gain job-related experience in positions other than as an employee. For instance, an accountant may gain experience as a treasurer of a civic or school organization, or a manager may gain experience while working on civic projects or in school organizations or in PTA activities. Please list and describe any paid or unpaid activities, honors, experience, or training that might aid you in performing the job(s) for which you have applied, and have not been listed previously in this application. (You may omit any activities, honors, memberships, or other items that tend to identify your race, sex, national origin, age, disability, or other personal traits that you prefer not to disclose.) Please add any additional information (except that which identifies your race, sex, age, religion, national origin, disability, or other non-job-related personal information) that you think may be relevant to a decision to hire you. **IMPORTANT** PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING. **Initials** By my signature and initials, I confirm that the information provided in this employment application (and accompanying resume, if any) is true and complete, and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify Alva State Bank & Trust Company if I should be convicted of a felony or any crime involving dishonesty or a breach of trust while my job application is pending or during my period of employment, if hired. I authorize any person, school, current employer (except as previously noted), past employer(s), and organizations named in this application form (and accompanying resume, if any) to provide Alva State Bank & Trust Company with relevant information and opinion that may be useful to Alva State Bank & Trust Company in making a hiring decision, and I release such persons and organizations from any legal liability in making such statements. If offered a job that requires it, I give permission for a drug test and/or a job-related complete physical examination, and I consent to the release to Alva State Bank & Trust Company of any medical information, as may be deemed necessary by Alva State Bank & Trust Company in judging my capability to perform the essential functions of the job for which I am applying (with or without a reasonable accommodation). I understand that if my employment is terminated by Alva State Bank & Trust Company for dishonesty, breach of trust, or any criminal acts, the authorities may be notified and I may be criminally prosecuted. I also understand that, if hired, I may not hold other employment nor engage in sales, investments, or other activities that may create a conflict of interest with Alva State Bank &

I understand that this application does not, nor is it intended to create a contract of employment. I understand and agree that, if hired, my employment is for no definite period of time and may, regardless of the date of payment of my wages or salary, be terminated at

Signature of Applicant

Date: _____

any time.

Name:

Release of Information Authorization

I hereby authorize Alva State Bank & Trust Company, its employees and its agents to verify any information I have provided. In connection with consideration for employment, and if hired, for the duration of my employment (including contract for services) with you, I understand investigative background inquiries are to be made on myself including consumer, criminal, driving and other reports. These reports will include information as to my character, work habits, performance and experience along with the reasons for termination of past employment from previous employers. Further, I understand you will be requesting information from various Federal, State and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies. (All inquiries are subject to the provisions of Fair Credit Reporting Act.).

I authorize my current and previous employers, educational institutions, banking and other financial institutions, credit rating bureaus or institutions maintaining individual credit rating files, and governmental agencies or political subdivisions to give any information requested regarding my employment, character, and qualifications. Any previous employer is also hereby authorized to release any and all documents which, by agreement with me, have been designated as confidential or sealed.

I expressly release and hold harmless Alva State Bank & Trust Company, their agents, employees and any person or organization who provides information or records relating to me from any and all liability or claims related to the investigation of my personal employment audit or financial history. I further agree to release and hold harmless any person or entity which provides accurate and further information to Alva State Bank & Trust Company or its agents in the course of conducting a background check for purposes of employment with Alva State Bank & Trust Company.

I hereby certify all the statements and answers set forth on the application form and/or my resume are true and complete to the best of my knowledge, and I understand that if subsequent to employment any such statements and/or answers are found false or information has been omitted, such false statements or omissions will be just cause for the termination of my employment. Further, I understand that by requesting this information, no promise of employment is being made. I am willing that a photocopy of this authorization be accepted with the same authority as the original; and that if employed by Alva State Bank & Trust Company, this authorization will remain in effect throughout such employment.

In compliance with the Privacy Act of 1974, the following information is provided: The disclosure of your Social Security Number (SSN) is voluntary. However, failure to supply a SSN may result in errors in processing your application. A false statement or material omission on any part of your application may be grounds for termination from employment.

I have read and understood and approve of the previous Privacy Act notice:

Name (Please print)	Social Security Number	
Previous Names/Maiden Names	Current Address	City/State/Zip
Date of Birth	Drivers License Number	State Issued
Date	Signature	