

All applications must be signed and delivered to Union Bank. Applications that are submitted electronically or otherwise without a signature will not be accepted.

# Union Bank Application for Employment

## Instructions

Read the section below carefully before completing this application. Please print and answer all questions completely and accurately. A resume may be attached, but does not substitute for the completion of this application. Also:

- If section does not apply, enter N/A
- Note the conditions of employment on page 4
- Note the requirement for proof of citizenship on page 1

## Personal and General Information

Date	
Name	Social Security Number
Current Address	How Long?
City, State, Zip	
Home Phone Number	Work Phone Number
Cell Phone Number	
E-Mail Address	
Previous Address	How Long?
City, State, Zip	
For the purpose of verifying prior employment and educational background, please indicate if you worked or attended school under any other name:	
If yes, give name:	
Referral Source:	Where did you see our ad?
<input type="checkbox"/> Advertisement	
<input type="checkbox"/> Current or Former Employee	Name:
<input type="checkbox"/> School Referral	School Name:
<input type="checkbox"/> College Recruitment	College Name:
<input type="checkbox"/> Employment Agency	Agency Name:
<input type="checkbox"/> Walk In	
<input type="checkbox"/> Other	Please describe:
Does your present employer know of your plans to change employment?	May we contact your present employer?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you previously applied for employment or been employed with Union Bank?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, previous job title:	
Supervisor:	Department:
Dates previously Employed or Applied:	
Are you related to any employees of Union Bank?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Name / Relation	

Union Bank is an equal opportunity employer and does not discriminate in hiring or employment on the basis of age, color, handicap, marital status, national origin, race, religion, sex, sexual orientation, veteran status or other protected characteristic.

Due to passage of the Immigration Reform and Control Act of 1986, all new employees are required to provide proof of identity and employment eligibility within 72 hours from date of hire. Common and acceptable forms of identity and employment eligibility include: passports, valid driver's licenses, social security cards, voter registration cards and birth certificates issued by state, county or municipal authority bearing a seal or other certification.

## Position Requirements

Desired Salary: \$

Desired Status:  Full-Time  Part-Time  Temporary

Will Travel if required or requested?

 Yes  No

Will work weekends if required or requested?

 Yes  No

Will work over-time if required or requested?

 Yes  No

Will work holidays if required or requested?

 Yes  No

Will work varying shifts if required or requested?

 Yes  No

## Educational Background

Name and Location of School	GPA	Number of Years Attended			
High School			Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, enter number of years completed:	
College/University			Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, enter number of hours completed:	Major/Minor
College/University			Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, enter number of hours completed:	Major/Minor
Technical School			Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course:	Certificate
Graduate School			Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Field of Study	Master Doctorate

Professional Courses Completed

## Skills and Qualifications

<b>Computer Skills</b>	<b>Yes</b>	<b>No</b>	<b>Please describe experience</b>
Personal Computer:	<input type="checkbox"/>	<input type="checkbox"/>	
Operating System(s):	<input type="checkbox"/>	<input type="checkbox"/>	
Applications (MS Word, Excel, etc.):	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Other Skills</b>	<b>Yes</b>	<b>No</b>	<b>Please describe experience</b>
Customer Service	<input type="checkbox"/>	<input type="checkbox"/>	
Cash Handling	<input type="checkbox"/>	<input type="checkbox"/>	
Math / Accounting	<input type="checkbox"/>	<input type="checkbox"/>	
Others			

### Employment Record

Starting with the most recent employer, list all prior work experience for the last ten years. You may attach extra pages if necessary.

Include any U.S. Military or National Guard Service.

Company Name	Phone #	Position	From	To
Address		Supervisor	Final Salary	
Reason(s) for Leaving:			<input type="checkbox"/> Currently Employed <input type="checkbox"/> Resigned <input type="checkbox"/> Terminated	

Duties Performed:

Company Name	Phone #	Position	From	To
Address		Supervisor	Final Salary	
Reason(s) for Leaving:			<input type="checkbox"/> Currently Employed <input type="checkbox"/> Resigned <input type="checkbox"/> Terminated	

Duties Performed:

Company Name	Phone #	Position	From	To
Address		Supervisor	Final Salary	
Reason(s) for Leaving:			<input type="checkbox"/> Currently Employed <input type="checkbox"/> Resigned <input type="checkbox"/> Terminated	

Duties Performed:

Please explain any gaps in employment of more than three months:

### References

Provide the names and contact information for three non-related individuals who are willing and able to provide a reference regarding your qualifications for the position for which you are applying.

Name:	Name:	Name:
Address:	Address:	Address:
Phone Number:	Phone Number:	Phone Number:
E-Mail Address:	E-Mail Address:	E-Mail Address:
Relationship:	Relationship:	Relationship:

## General Information

Please answer all questions listed below

Have you ever been convicted in any court, whether civilian or military of a violation of the law, excluding minor traffic offenses? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide:	Has a court of law ever withheld adjudication for a crime for which you were charged? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide:
Offense:	Offense:
Date:	Date:
City and State:	City and State:
Disposition of Case:	Disposition of Case:
Court Location:	Court Location:
Any Rehabilitation:	Any Rehabilitation:
Are you awaiting trial for a violation of the law, excluding minor traffic offenses? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide:	Note: Conviction of a crime and/or court's adjudication of guilt being withheld and/or the fact that you are awaiting trial will not necessarily bar you from employment.
Charge:	
Date Charged:	
Trial Date:	
Court Name and Location:	

## Conditions of Employment

I certify that each of the answers given in this application is complete and true to the best of my knowledge and I understand that any misrepresentation or omission may preclude an employment offer or may result in termination of employment. I understand that as part of the Union Bank selection process I may be requested to complete pre-employment written or computer skills testing to be considered for the position. I authorize Union Bank to investigate all statements made in the application process and understand that consideration for employment is contingent on the completion of satisfactory background investigation. Nothing in this application is intended to create a contract between Union Bank and me. If hired, I understand and agree that my employment, and the terms and conditions of my employment, may be terminated or changed by Union Bank at any time with or without notice.

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 Applicant's Signature

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 Date

When considering applicants for employment and/or employees for promotion or assignment to certain positions, it is part of the normal policy of Union Bank to request a consumer reporting agency to prepare a consumer report which will be used in whole or in part for the purpose of service as a factor in establishing your eligibility for employment and/or for other employment purposes. A consumer report may include information bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, including an investigative credit report.

I authorize Union Bank to obtain such a report and release Union Bank from any liability with obtaining such a report and/or taking and adverse action, based in whole or in part, on the consumer report.

\_\_\_\_\_  
Signature of Applicant/Employee

\_\_\_\_\_  
Date

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

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

\_\_\_\_\_  
Current Street Address

\_\_\_\_\_  
City, State and Zip Code

# Union Bank

# APPLICANT DATA SURVEY

Both applicants and employees are considered and treated without regard to race, color, creed, sex, national origin, ancestry, age, veteran status, disability, or any other legally protected status.

In an effort to ensure Equal Employment Opportunity (EEO), we ask that you respond to the questions below. Please print legibly using black ink or type. We appreciate your cooperation.

This data will be kept strictly confidential and totally separate from your Employment Application. Therefore, it will not influence the employment decision. **YOUR COOPERATION IS VOLUNTARY.** For questions about this form contact our Human Resources Department at (802)888-6600 or [hr@unionbankvt.com](mailto:hr@unionbankvt.com).

## Voluntary Survey

Name:	Date:
Position Applied For:	Check One: <input type="checkbox"/> Male <input type="checkbox"/> Female
How were you referred to Union Bank (check one)?	
<input type="checkbox"/> Agency <input type="checkbox"/> Direct Contact <input type="checkbox"/> Advertisement <input type="checkbox"/> School <input type="checkbox"/> Union Bank Employee	
<input type="checkbox"/> Other _____	

Name of Referral source above:

## Race (please check all that apply)

- White – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black or African American – A person having origins in any of the Black racial groups of Africa.
- Hispanic or Latino (White race only) – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of the white race.
- Hispanic or Latino (all other races) – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of any race other than White.
- Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- American Indian/Alaskan Native – A person having origins in any of the original people of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.

## Veteran Status (please check all that apply)

- Qualified Disabled Veteran – 1) a person entitled to disability compensation under laws administered by the Veteran Administration for disability rated at 30% or more, or 2) a person whose discharge from active duty was for a disability incurred or aggravated in the line of duty, and 3) is capable (qualified) of performing a particular job with reasonable accommodation to his/her disability.
- Vietnam Era Veteran – A person who 1) actively served for more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was released with other than a dishonorable discharge, or 2) was released from such active duty for a service-connected disability.
- "Other Veteran" – Other Veteran is defined as a veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized. A complete list of campaigns is at [www.opm.gov/veterans/html/vgmedal2.htm](http://www.opm.gov/veterans/html/vgmedal2.htm)
- Newly Separated Veteran – Veterans whose discharge date from active duty in the US military occurred in the past 12 months.



## Candidate Release Authorization

- I. In connection with my application for employment or continued employment at Union Bank (the Company), I understand that a consumer report and/or investigative consumer report will be ordered that my include information as to my character, general reputation, personal characteristics, mode of living, work habits, performance and experience, along with reasons for termination of past employment. I understand that to the extent permitted by applicable law and as directed by company policy and consistent with the job described, the Company may be requesting information from public and private sources about me, including but not limited to: social security number validation, criminal conviction records, employment and earnings history, education, credit, licensing and certification checks, references, military service, sex offender registry, civil cases, OIG/GSA, OFAC/Patriot Act records, any sanctions list, FBA fingerprinting, and if applicable, workers' compensation injuries, driving record, drug testing results. If company policy requires and to the extent permitted by law, I am willing to submit to alcohol and/or drug testing to detect the use of alcohol or drugs prior to and during employment.
- II. Medical and workers' compensation information will only be requested in compliance with the federal Americans with Disabilities Act (ADA) and/or any other applicable state or local laws and only after a conditional job offer is made.
- III. I acknowledge that a telephonic facsimile (FAX) or photographic copy shall be as valid as the original. This release is valid for most federal, state and county agencies. In the event that an agency or record source requires an alternative release form or additional identifying characteristics in order to release the requested information, I agree to provide the additional information and sign any additional release authorizations, if so requested by the Company.
- IV. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my prospective employer from a Consumer Reporting Agency. If so, I will be notified and given the name and address of the agency or the source that provided the information.
- V. I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer, reference, insurance company or other applicable record source contacted by Union Bank (the Company) or its agent, to furnish the information described in Section I.
- VI. If applicable, I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer to Union Bank. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released by my previous employer is limited to the following DOT-regulated items: alcohol tests with a result of 0.04 or higher, verified positive drug tests, refusals to be tested, other violations of DOT agency drug and alcohol testing regulations, information obtained from previous employers of a drug and alcohol rule violation and any documentation of completion of the return-to-duty process following a rule violation.

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. I understand that this information is confidential and will not be used for any other purposes. I hereby release the employer, its agents, officials, representatives or assigned agencies, including officers, employees or related personnel, both individually and collectively and all persons, agencies, and entities providing information or reports about me from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family or associates arising out of the requests for or release of any of the above mentioned information or reports.

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Please print your full name. Last First Middle

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Please print other names you have used (maiden name, surname, alias name).

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Current Address City State Zip Code

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(FOR IDENTIFICATION PURPOSES ONLY) Social Security Number Date of Birth

I CERTIFY THAT THE INFORMATION THAT I PROVIDED ON THIS FORM IS TRUE AND CORRECT. I UNDERSTAND THAT FALSE INFORMATION, MISREPRESENTATIONS AND OMISSIONS MAY DISQUALIFY ME FROM CONSIDERATION FOR EMPLOYMENT, OR IF I AM HIRED OR ALREADY WORK FOR THE COMPANY, THAT I MAY BE DISCIPLINED, UP TO AND INCLUDING TERMINATION.

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Signature Today's Date