



Application for Employment

Name: _____

Position applied for: _____ Date: _____

Rome Savings Bank considers all applicants for employment without regard to race, color, religion, sex, national origin, age, genetic predisposition or carrier status, disability, or status as a Vietnam-era or special disabled veteran or any other characteristic protected by federal, state or local law.

The Bank will endeavor to make a reasonable accommodation to enable an individual with a known disability to participate in the applicant selection process and perform the essential functions of a job. If you need assistance completing this application form, participating in the hiring process or performing the essential functions of a position, please inform us.

Rome Savings Bank is an Equal Opportunity/Affirmative Action Employer

Full Name: _____ Social Security No.: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Telephone #: _____ Referred by: _____



1. Are you over the age of 18? Yes No If no, state your age: _____

2. Are you willing to work overtime as necessary? Yes No
At this time, you do not have to identify any religious beliefs which would prevent you from working overtime. If, and after a conditional offer of employment is made, we will endeavor to reasonably accommodate bonafide religious beliefs.

3. Date you can start: _____ Salary desired: _____

4. Have you ever been employed by us? Yes No
If yes, please indicate dates and location? _____

5. State name(s) of any relative(s) in our employ and your relationship to them:

6. Have you ever been convicted of a crime*? Yes No
(If yes, state nature of offense, when, where it occurred, and any subsequent rehabilitation:

* A conviction will not necessarily bar employment.

7. Are you authorized to lawfully work in the United States? Yes No
Pursuant to the Immigration Reform and Control Act of 1986, if an offer of employment is made, you will be required to provide proof of identity and eligibility to work in the United States.

RECORD OF EDUCATION

School Name	School Address, City, State & Zip Code	Course of Study	No. of yrs completed	Did you Graduate?	Diploma/Degree Received
High School:					
College:					
University:					
Other:					
Other:					

PRIOR WORK HISTORY

In order, list last or current employer first. Please list additional positions on another sheet of paper.
Account for any gaps in your employment.

May we contact your present employer at this time? [] Yes [] No

Dates From To Mon/Yr. Mon/Yr.	Name, Address, and Telephone No. of Employer	Position Held Salary Start / End	Supervisor's Name/Title	Reason for Leaving

List any training, skills or experience which will assist us in evaluating your application. (You need not list an organizational affiliation which will disclose religious beliefs or other protected characteristics.)

PERSONAL REFERENCES (excluding relatives)

Name & Occupation	Years Known	Address (City, State & Zip Code)	Telephone No.
1.			
2.			
3.			
4.			
5.			

SKILLS

1. Any skills that you believe are related to the job for which you are applying.
Shorthand _____w.p.m. Typing _____w.p.m.
2. Computer/Software use(d) _____.
3. Have you signed any contract, restrictive covenant or covenant not to compete, which would prevent you from performing any duties for Rome Savings Bank?
 Yes No (If yes, please provide a copy of the Agreement to us.)

This Application for Employment will remain open for a period of thirty (30) days. After that time, you will be required to complete a new Application before applying for another position.

PRE-EMPLOYMENT STATEMENT

(Please read carefully and sign the statement below)

I understand and state that :

1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any facts in my application, resume, or any other materials, or during any interviews, can be justification of refusal of employment, or, if employed, termination from Rome Savings Bank.
2. Any offer of employment that I may receive from the Rome Savings Bank is contingent upon my successful completion of the company's total pre-employment screening process.
3. In processing my application for employment, the Bank may verify all the information provided by me including, but not limited to, my prior employment, education, character, general reputation, personal characteristics, criminal record, and mode of living.
4. I authorize any request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information.
5. If employed, I will comply with the policies, rules, regulations, and procedures of the Bank. I understand that, if hired, my employment with the Bank will be at-will and can be terminated with or without cause or notice, at any time, at the option of either the Bank or myself. I also understand that no Bank employee except the President can sign a contract of employment with me on behalf of the Bank.
6. This application must be completed fully since the information given will be of assistance in determining whether the applicant's experience and training are suitable for Bank work. This application will become property of Rome Savings Bank and cannot and will not be reproduced, copied or distributed under any circumstances.
7. I understand that the Bank and all benefit plan administrators retain the maximum discretion permitted by law to modify, interpret, administer, supplement or discontinue any policy, procedure or benefit offered by the Bank.
8. The Bank will consider this application active for 30 days. After the 30 days, if a position becomes available, you will need to apply again.

Signature _____ Date _____



Disclosure to Applicant and Consent to Request Consumer Report Information

Supplement to Application for Employment

I understand that The Rome Savings Bank may use the services of a Consumer Reporting Agency as part of the procedure for processing my application for employment. Upon request, I will be informed whether a report was requested from a consumer reporting agency and provided with the name and address of the consumer reporting agency. I also understand if my application for employment is granted The Rome Savings Bank may obtain further information through subsequent investigations by a consumer reporting agency to update, renew or extend my employment.

I understand a consumer reporting agency's investigation may include obtaining information covering up to the last seven (7) years regarding my credit background, references, character, past employment, work habits, education, general reputation, personal characteristics, mode of living, judgment and liens. The investigation also may include information relating to felony and misdemeanor criminal convictions consistent with state law, without any time limitations.

I understand such information may be obtained by direct or indirect contact with former employers, schools, financial institutions, landlords and public agencies or other persons who may have such knowledge.

I also understand that before I am denied employment based, in whole or part, on information obtained in the report, I will be provided a copy of the report and a description in writing of my rights under the federal Fair Credit Reporting Act.

I understand if I disagree with the accuracy of any information in the report, I must notify The Rome Savings Bank within two days of my receipt of the report. If I notify The Rome Savings Bank within two days of the receipt of the report that I am challenging information in the report, The Rome Savings Bank will not make a final decision on my employment status until after I have had a reasonable opportunity to address the information contained in the report.

I hereby consent to this investigation and authorize The Rome Savings Bank to obtain a report on my background as stated above from a consumer reporting agency.

Signature of applicant

Date



CREDIT AUTHORIZATION

Supplement to Application for Employment

Rome Savings Bank may run a credit report on all candidates who apply for the posted position. I hereby authorize Rome Savings Bank to check my credit record with any legitimate credit agency.

Signature

Date

Print Name

Address

City, State and Zip Code

Social Security Number