



PROFILE BANK FSB
45 Wakefield Street
Rochester, NH 03867

Date of Application _____

APPLICATION for EMPLOYMENT

Name _____
Last First Middle Initial

Address _____
No. Street Apt. # City State Zip

Telephone # () _____ Alternate Phone # () _____

E-mail Address _____

Position(s) applied for _____
 Full-time Part-time Temporary

Referral Source (Please specify the source, such as Bank Employee, Walk-in, Bank's Website, Advertisement, etc.) _____

If necessary, best time to call you is:
_____ AM _____ PM

Date available for work: _____ / _____ / _____

Desired salary or hourly rate of pay: _____

If you are under 18 and it is required, can you furnish a work permit? Yes No

Will you work overtime if required?
 Yes No

Have you submitted an application to Profile Bank before? Yes No
If YES, give date(s) & position(s) _____

If NO, please explain: _____

Have you ever been employed at Profile Bank before? Yes No
If YES, when? From: _____
To: _____

Will you travel between branches if job requires it?
 Yes No

Are you legally eligible for employment in the United States? Yes No

Have you ever been bonded? Yes No
(Answering "Yes" to the above question DOES NOT constitute an automatic bar to employment.)

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? [] Yes [] No
If YES, please provide dates(s) and details: _____

EMPLOYMENT HISTORY

Starting with your most recent employment, please provide the following information.

EMPLOYER	ADDRESS	TELEPHONE
Starting & Final Job Title(s): _____		
Employment Dates: From: _____	To: _____	May we call this employer for a work reference? [] Yes [] No
Name & Title of Most Recent Supervisor: _____		
Summarize your job responsibilities in the final job: _____ _____		
What did you like most about your position? _____		
What did you like least about your position? _____		
Why did you leave? _____		

EMPLOYER	ADDRESS	TELEPHONE
Starting & Final Job Title(s): _____		
Employment Dates: From: _____	To: _____	May we call this employer for a work reference? [] Yes [] No
Name & Title of Most Recent Supervisor: _____		
Summarize your job responsibilities in the final job: _____ _____		
What did you like most about your position? _____		
What did you like least about your position? _____		

EMPLOYER	ADDRESS	TELEPHONE
Starting & Final Job Title(s): _____		
Employment Dates: From: _____ To: _____	May we call this employer for a work reference? [] Yes [] No	
Name & Title of Most Recent Supervisor: _____		
Summarize your job responsibilities in the final job: _____ _____		
What did you like most about your position? _____		
What did you like least about your position? _____		

Please use another sheet of paper for work experience, if necessary, and/or attach resume.

Please list any unpaid volunteer experience you have which may be pertinent experience for a position with Profile Bank. _____

Please explain any gaps in your employment. _____

SKILLS and QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which are you applying. Include your computer skills. _____

EDUCATIONAL BACKGROUND

Starting with the school you have most recently attended, please provide the following information.

Name of School and City/State	Years Completed	Degree/Diploma Received	Major/Minor (Area of Study)
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REFERENCES

List name and telephone number of 3 business/work references who are not related to you. If not applicable, list 3 school or personal references who are not related to you.

Name	Title	Phone/Email	Context in which you know person	# Years Known
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RELATED INFORMATION

In your current or a prior job, have you ever written instructions or directions to be followed by employees or customers? Yes No Not applicable If YES, please explain: _____

In answering the following questions, exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical challenges, veteran/Reserve/National Guard, sexual orientation, or any other similarly protected class.

To what job-related organizations do you belong? If you have held an office, please specify.

List special accomplishments, awards, publications, etc.

Is there any other job-related information you want us to know about you? _____

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with Profile Bank is true, complete, and correct.

I understand that Profile Bank does not unlawfully discriminate in employment, and nothing on this application form is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis which is prohibited by applicable local, New Hampshire, or federal law.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and Profile Bank reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment. I understand that no Board member, Officer, or supervisor is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing language are valid unless they are signed by the President.

I also understand that if I am hired, I will be required to provide proof of identity and legal eligibility to work in the United States and that federal immigration laws require me to complete an I-9 form.

RELEASE STATEMENT

I hereby give Profile Bank the right to make a thorough investigation of my past employment, education, and activities, and I release from all liability all persons, companies, schools, agencies, and corporations supplying such information. I indemnify Profile Bank against any liability which might result from making such investigation.

I authorize Profile Bank to obtain a credit report on me through the credit reporting agency of its choice. If employed, I further authorize Profile Bank to re-check my credit record, if warranted as relative to my employment.

I understand that if an adverse employment decision is made due totally or partially to the information on the credit report, Profile Bank will give me a copy of the credit report, a summary of my rights under the Fair Credit Reporting Act, and the source of the credit report so that I may contact them if I wish.

I certify that I have read, fully understand, and accept all parts of the foregoing Applicant Statement and that I accept and agree to the Release Statement. My signature below applies to both the Applicant Statement and the Release Statement.

Applicant's Signature

____/____/____
Date

Profile Bank, F.S.B. is an Equal Opportunity / Affirmative Action Employer. Qualified applicants will be evaluated for employment without regard to race, color, religion, gender, sexual orientation, gender identification, national origin, veteran status or disability status.

APPLICANT
Voluntary Self-Identification of Gender/Race/Ethnicity

Profile Bank is an Equal Opportunity/Affirmative Action Employer. It is our policy to hire, train, promote and otherwise provide terms and conditions of employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, ancestry, age, marital status, pregnancy, disability or veteran status. All employment decisions are based solely on valid requirements, in accordance with the principles of equal employment opportunity.

We are subject to Executive Order 11246 and certain nondiscrimination and affirmative action recordkeeping and reporting requirements which require us to invite applicants and employees to voluntarily self-identify their gender, race and ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal law. Race/ethnicity information is collected and reported in the categories established by the federal government.

Position Applied for: _____

Gender:

- Male
- Female
- I prefer not to self-identify

Ethnicity:

- Hispanic or Latino
- Not Hispanic or Latino
- I prefer not to self-identify

Race:

- White
- Native Hawaiian or other Pacific Islander
- American Indian or Alaskan Native
- I prefer not to self-identify
- Black or African American
- Asian
- Two or more races

APPLICANT
Profile Bank - Affirmative Action Invitation for Veterans
Voluntary Self-Identification of Veteran Status

As a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires Government contractors to take affirmative action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. To help us measure how well we are doing, we are asking you to tell us if you are a veteran. Completing this is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

- I am a protected veteran.
- I am NOT a protected veteran.
- I do not wish to answer.

If you are a disabled veteran it would assist us if you tell us whether there are accommodations we could make that would enable you to perform the essential functions of the job, including special equipment, changes in the physical layout of the job, changes in the way the job is customarily performed, provision of personal assistance services or other accommodations. This information will assist us in making reasonable accommodations for your disability. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are not inconsistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended. The information you submit will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) Government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs, or enforcing the Americans with Disabilities Act, may be informed. **Please contact Human Resources for more information.**

**Profile Bank - Affirmative Action Invitation for Individuals with Disabilities
Voluntary Self-Identification of Disability (OMB# 1250-0005 – Form CC-305)**

Because we do business with the government and are subject to Section 503 of the Rehabilitation Act of 1973, as amended, we must reach out to hire, and provide equal opportunity to qualified people with disabilities. To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity or if you have a history or record of such impairment or medical condition.

Disabilities include but are not limited to:

Blindness	Cerebral palsy	Bipolar disorder	Obsessive compulsive disorder
Deafness	HIV/AIDS	Major depression	Impairments requiring use of a wheelchair
Cancer	Autism	Multiple Sclerosis	Intellectual disability
Diabetes	Schizophrenia	Epilepsy	Missing/partially missing limbs
Muscular dystrophy		Post-Traumatic stress	

Please contact Human Resources to complete this form and for more information.

YES, I HAVE A DISABILITY (or previously had a disability)

NO, I DON'T HAVE A DISABILITY

I DO NOT WISH TO ANSWER

NAME

DATE

Reasonable Accommodation Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternative format, using a sign language interpreter or using specialized equipment. *Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal Contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance (OFCCP) website at www.dol.gov/ofccp*