



APPLICATION FOR EMPLOYMENT

Applications must be complete and legible. All questions must be answered. If a question does not apply to you, write the words 'Not Applicable' as the answer.

<u>Name</u>			
(First)	(Middle)	(Last)	(Social Security Number)
<u>Address</u>			(Telephone Number)
(City)	(State)	(zip)	(Email Address)

Type of work desired _____

Salary Requirements _____ Are you age 18 or older? _____

How were you referred to us? _____

Have you ever been convicted, or plead "guilty" or "no contest" to a criminal offense? * _____

Have you ever been fired for violence, threats, insubordination, misconduct, or absenteeism? * _____

*If **yes**, give details.

<u>Education</u>	Name	Location	Major	If graduated, When?	Degree
	High School or Preparatory				
	Business or Trade School				
	College or University				
	Graduate Work				

List scholastic honors, offices held, and activities held while in school: _____

MILITARY SERVICE RECORD

Have you served in the Armed Forces of the United States? _____

Date of entry _____ Rank at entry _____ Branch of Service _____

Date of Discharge _____ Rank at discharge _____ Type of Discharge _____

Are you at present in any active or inactive reserve of the National Guard? _____

EMPLOYMENT RECORD

Starting with PRESENT or MOST RECENT, list all previous employers. Include self-employment, summer and part-time jobs.

Names and Address of Former Employer	Dates Employed	Position & Duties	Final Salary	Reason for Leaving
Company	From			
Address	To			
City,State,Zip				
Supervisor				
Company	From			
Address	To			
City,State,Zip				
Supervisor				

If you are now employed, may we contact your present employer? _____

FINANCIAL DATA

Have you ever held a position where you handled cash? _____ (Identify) _____

Do you maintain a good credit record? _____ yes; _____ no; _____ I have no credit history.

PERSONAL REFERENCES

Give three personal references who are mature persons of good standing in their community, and who have known you for the past FIVE years or more. DO NOT give relatives, former employers or fellow employees. You may include friends or acquaintances presently employed by this Company.

NAME	ADDRESS	PHONE	OCCUPATION

Drug and Alcohol Testing Policy

It is the purpose of United Mississippi Bank to help provide a safe and drug free environment for our guests and our employees (see drug and alcohol testing policy). Pre-Employment Testing: All candidates who have received a written or oral offer of employment will be required to undergo testing for commonly abused controlled substances.

APPLICANT'S STATEMENT

I certify that the answers given in this application are true and complete to the best of my knowledge and I have not knowingly withheld information which might, if disclosed, affect my application unfavorably. I understand that employment arrangements entered into between the Company and me will be based upon the truthfulness and completeness of this application. Misstatements, falsifications, or omissions of any information submitted by me may result in the rejection of my application and if I have already been employed, may be cause for dismissal.

I have read and understand that this application is good for ninety (90) days and if not offered employment during that time will necessitate that I renew this application in order to be considered beyond that date. I understand that the Company does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, ancestry, genetic or family medical history information, handicap, qualified veteran status or age. No question on this application is intended to secure information as such.

I further understand that submission of this application does not imply that I will be employed, even though I will be given every consideration. I hereby give full release for the Company to check my background and with my references, as well as investigate my credit history and criminal record (see background investigation policy). This may include searches of social media and other sources of public information. The Company, at its own expense, arranges for a surety bond for each of its employees and if, because of my background, the Company is unable to place the required bond, the Company will be unable to continue my employment.

I further understand that if I am employed, my employment will be at will. No agent or either party hereto has the authority to agree otherwise. In addition, I have received in writing a copy of the drug policy and consent to the terms herein including pre-employment drug testing.

I have read carefully and understand the above.

Signature of Applicant: _____

Date _____

Received by: _____

Date _____

Human Resources: _____

Date _____

____ Copy of Drivers License

____ Background Investigation Policy Delivered

____ Copy of Social Security Card

____ Drug and Alcohol Policy Delivered