

Thank you for your interest in joining our team!

Attached is an application. For questions, please email

employment@chippewavalleybank.com

Applications must be submitted via email.

Drop-off or in person applications are not permitted.

Our HR department will be in touch.

Thank you!

FOR OFFICE USE ONLY	
Possible Work Locations	Possible Positions

APPLICATION FOR EMPLOYMENT

With

(The "Company")
An Equal
Opportunity Employer

FOR OFFICE USE ONLY	
Work Location	Rate
Position	Date

This application will be held in the active file for _____ days. If you wish to be considered after that date, please recontact us.

(PLEASE PRINT PLAINLY)
PERSONAL

Date _____

Name _____ Last _____ First _____ Middle _____ Telephone No. _____

Present Address _____ No. _____ Street _____ City _____ State _____ Zip _____

Please list any previous name(s) used at former employers or schools _____

Are you legally eligible for employment in the U.S.A.? _____ (If you are hired, federal law requires that you provide documentation of your identity and eligibility for employment and that you attest to your eligibility for employment).

If you are under age 18, state your age _____.

Position(s) applied for _____

Hours desired Full-Time _____ Part-Time _____ (indicate number of hours desired)

Have you been employed here previously? ☐ Yes ☐ No Have you ever applied here before? ☐ Yes ☐ No

If you are offered employment, on what date will you be available for work? _____

The Company is an equal opportunity employer. The Company does not discriminate in hiring or employment on the basis of race, color, creed, national origin, marital status, sex, sexual orientation, gender identity, religion, ancestry, age, disability, veteran status, arrest or conviction record (except as permitted by law), or any other applicable protected classification. It is the Company's policy to comply with all laws prohibiting discrimination.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. One of the factors in determining whether an applicant will be employed is that the Company, at its own expense, arranges for a surety bond for its employees who are required by law to be bonded. Unless the applicant's background is acceptable to a surety company, the Company may be unable to offer employment.

EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed				Did You Graduate?	List Diploma or Degree	Grade Point Average
High			9	10	11	12	<input type="checkbox"/> Yes <input type="checkbox"/> No		
College			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other (Specify)			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other (Specify)			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No		

List courses you have completed in the last _____ years or are currently taking that will aid the Company in evaluating your qualifications for the position you are applying for. Use additional space if necessary. (Example: If applying for a clerical position, note training such as word processing, other computer skills, etc.) Please include grade or other indicator of achievement.

COURSE	SCHOOL OR OTHER SPONSOR OF COURSE	DESCRIBE MAJOR CONTENT OF COURSE	GRADE

GENERAL INFORMATION

(Note: When completing this application, your responses to inquiries about organizations and activities should not be revealing as to race, color, creed, national origin, age, religion, marital or veteran status, sexual orientation, gender identity, disability, ancestry, or other protected classification.)

List relevant scholastic honors, offices held, and relevant activities:

List your activities, skills and aptitudes that you believe would reasonably bear on your qualification for the position you are applying for at the Company. (You may wish to include civic and community activities, professional societies relating to the specific position for which you are applying, and special training or skills such as accounting/bookkeeping, computer skills, or other skills.) If you need more space, please continue on a separate sheet.

Have you ever been convicted of a criminal offense? ☐ Yes ☐ No

(Note: A conviction does not automatically disqualify an applicant from employment. The nature of the conviction will be considered in accordance with law.) If the answer is "yes," then for each such conviction, indicate (a) the date(s) of conviction, (b) the nature of the offense, (c) the penalty imposed, (d) whether the offense involved a financial institution, and (e) the circumstances involved. Exclude any arrest(s), acquittal(s), conviction(s) reversed on appeal, conviction(s) that have been completely expunged, and/or any adjudgment(s) against you by a court as a "youthful offender" or "juvenile delinquent."

Do you have any criminal charges pending against you? _____

(Note: A pending charge does not automatically disqualify an applicant from employment. The nature of the charge(s) will be considered in accordance with law.) If the answer is yes, indicate the pending charge(s) and surrounding circumstances:

Have you entered into a pretrial diversion or similar program relating to any criminal offense ("program entry")? ☐ Yes ☐ No

(Note: For purposes of this inquiry, "program entry" is defined as suspension or eventual dismissal of charges or criminal prosecution upon agreement to enter into treatment, rehabilitation, restitution, or other noncriminal or nonpunitive alternatives. Entry into such a program does not automatically disqualify an applicant from employment. The nature and date of the program will be considered in accordance with law.)

For each such "program entry," indicate (a) the date(s) you entered into the program, (b) the nature of the offense, (c) whether you completed the required treatment, rehabilitation, restitution, or other alternatives, (d) the ultimate disposition of the charges, and (e) the circumstances involved. Exclude any program entries prior to November 29, 1990.

Has a surety bond ever been refused to you? ☐ Yes ☐ No For a position for which a surety bond is a requirement: If yes, indicate when and the surrounding circumstances: _____

List below all present and past employment, beginning with your most recent position.

DATES	NAME AND ADDRESS OF EMPLOYER	DESCRIBE THE WORK YOU DID	EXACT REASON FOR LEAVING
From:			
To:			
	Telephone:	Supervisor:	May we contact them?
From:			
To:			
	Telephone:	Supervisor:	May we contact them?
From:			
To:			
	Telephone:	Supervisor:	May we contact them?
From:			
To:			
	Telephone:	Supervisor:	May we contact them?

If you need more space to list all of your present and past employment, please continue on a separate sheet.

PERSONAL REFERENCES
(Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number	No. of years you have known reference

ACKNOWLEDGMENT AND CONSENT

PLEASE READ BEFORE SIGNING. If you have any questions regarding this Acknowledgment and Consent, please ask them of a personnel officer before signing.

In order that the Company may arrive at an employment decision, I understand that the Company may do any or all of the following, and I hereby consent to the same:

1. Investigate all statements contained in this application for employment.
2. Request that I be fingerprinted.
3. Conduct a criminal background check and/or credit background check in compliance with state and federal law.
4. Check all references.

I understand that if I receive an offer of employment I may be required to undergo a pre-employment medical examination conducted by a doctor of the Company's choice, and to submit to drug screening. I also understand that my employment may be conditioned on the results of that examination and screening.

If employed, as a condition of continued employment, I agree to submit to drug screenings at the request of the Company or in accordance with the Company's policy. I understand that failure to cooperate with the testing may be grounds for dismissal.

In the event that I am employed by the Company:

I understand that my employment can be terminated at any time, with or without cause, either at my option or that of the Company; I understand that no personnel recruiter, interviewer or other representative of the Company other than the President has any authority to enter into any agreement for employment for any specified period of time; I also understand that any employment manuals or handbooks that may be distributed to me during the course of my employment shall not be construed as an employment contract or contrary to at-will employment status.

I certify that the answers and information given in this employment application are true and correct to the best of my knowledge. I agree that false or misleading information given or material omissions of information in my application or interviews may disqualify me from consideration, or, if I am hired, may be grounds for discharge from employment.

Date

Signature

FOR COMPANY USE ONLY (To be filled in AFTER applicant is hired or refused employment)

Date employment offered _____ Date accepted _____ Date refused _____

Date employed _____ ☐ Exempt ☐ Non-exempt

Department _____

Job Title _____ Work Schedule (Hrs., Days, etc.) _____

Job No. _____

Former Name _____

In case of accident or other emergency who is the first person we should contact?

Name _____ Relationship _____ Telephone _____
(Home) (Business) (cell)

Address _____
(Number) (Street) (City) (State)

Address _____
(Place of Work) (City) (State)

How to sign the application

On a computer:

Save the file Fill & Sign

Sign yourself/ add signature Save

Attach to an email to send back

On an iPhone: (without a pdf app)

Open PDF/file

Fill out all info

To Sign; Save as (top right) Mark up

Sign with finger

Save File to

Save - PDF will update in email attachment

CHIPPEWA VALLEY BANK
CONFIDENTIAL INFORMATION VOLUNTARY SURVEY
SELF-IDENTIFICATION FORM
(New Hires/Current Employees)

Chippewa Valley Bank is an Equal Opportunity Employer. Applicants and Employees are treated during employment without regard to race, color, religion, sex, sexual orientation, national origin, age, veteran status, medical condition or handicap/disability, or any other legally protected status.

We comply with government regulations, including affirmative action responsibilities where they apply. Solely to help us comply with governmental records keeping, reporting and other legal requirements, we request that you fill out the Self-Identification Form. We appreciate your cooperation. This data is for periodic government reporting and affirmative action purposes, and will not become part of your employment file or application, nor will it be used as a basis for any personnel action. Your cooperation is voluntary.

Name: _____ Date: _____

Position Applied For (if applicant): _____

Referral Source:

Advertisement
Government Job Service

Friend/Relative
Walk-In

Veteran Service Organization
Other

Various government agencies request statistical information regarding our hiring practices. Submission of this information is **CONFIDENTIAL**. Your decision to provide the information will not result in any adverse treatment. **SUBMISSION OF THE INFORMATION REQUESTED BELOW IS STRICTLY VOLUNTARY.**

Check One:

Male

Female

Check one of the following Race/Ethnic Groups:

Hispanic or Latino

Other

If other, check one of the following Race/Ethnic Groups:

White

Black/African American

Asian

Two or more Races

Native American/Alaskan Native

Native Hawaiian or Other Pacific Islander

- | | | |
|--------------------------------------------------------------------------|-----|----|
| 1. A Disabled Veteran | YES | NO |
| 2. An Armed Forces Service Medal Veteran | YES | NO |
| 3. A Recently Separated Veteran | YES | NO |
| 4. An Active Duty Wartime or Campaign Badge
(Other Protected) Veteran | YES | NO |
| 5. A Disabled Individual | YES | NO |

_____ I decline to provide this information.

Signature: _____

Date: _____

APPLICANT'S AUTHORIZATION FOR BACKGROUND SCREENING

Applicant Name (First, Middle Last)

_____/_____/_____
Date of Birth

Social Security Number

Male/Female

Aliases/Previous Name(s)

Current Address

City

State

Zip Code

Driver's License #

State

Prospective Employer

FCRA Authorization to Obtain a Consumer Report (Background/Credit Check)

Pursuant to the federal Fair Credit Reporting Act, I hereby authorize Chippewa Valley Bank and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for employment, promotion, reassignment or retention as an employee. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: verification of Social Security number; current and previous residences; employment history, including all personnel files; education; references; credit history and reports; criminal history, including records from any criminal justice agency in any or all federal, state or county jurisdictions; birth records; motor vehicle records, including traffic citations and registration; and any other public records.

I authorize the complete release of these records or data pertaining to me that an individual, company, firm, corporation or public agency may have. I hereby authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me to furnish Chippewa Valley Bank or its designated agents with any and all information in their possession regarding me in connection with an application of employment. I am authorizing that a photocopy of this authorization be accepted with the same authority as the original.

I understand that, pursuant to the federal Fair Credit Reporting Act, if any adverse action is to be taken based upon the consumer report, a copy of the report and a summary of the consumer's rights will be provided to me.

Signature

Date

Print name

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer

reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-567-8688.
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue NW Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group P.O. Box 53570 Houston, TX 77052</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. Division of Depositor and Consumer Protection National Center for Consumer and Depositor Assistance Federal Deposit Insurance Corporation 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Assistant General Counsel for Office of Aviation Consumer Protection Department of Transportation 1200 New Jersey Avenue SE Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Public Assistance, Governmental Affairs, and Compliance Surface Transportation Board 395 E Street SW Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Division Regional Office</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Administrator, Office of Capital Access United States Small Business Administration 409 Third Street SW, Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street NE Washington, DC 20549</p>
<p>8. Institutions that are members of the Farm Credit System</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue NW Washington, DC 20580 (877) 382-4357</p>