

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color religion, creed, gender, national origin, age, disability, marital or veteran status, or any other protected status.

(Please Print)

Position Applied For	Date of Application
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How Did You Learn About Us?		
Advertisement	Friend	Inquiry
Employment Agency	Relative	Other _____

Applicant			
_____ Last Name		_____ First Name	_____ Middle Name
Address			
_____ Address		_____ City	_____ State _____ Zip
Telephone #	Message Phone #	Social Security # (Voluntary)	Driver's License #

Best time to contact you at home is:	_____ : _____	AM	PM
If you are under 18 years of age, can you provide required proof of eligibility to work?	Yes	No	
Are you prevented from lawfully completing an INS Form I-9? <small>[Pursuant to the Immigration Reform and Control Act of 1986, all applicants who receive an employment offer must immediately complete an I-9 form and produce documentation, within 72 hours of initiating employment, establishing their identity and authorization for employment in the United States.]</small>	Yes	No	
Have you ever filed an application with us before? If yes, please give date: _____	Yes	No	
Have you ever been employed with us before? If yes, please give date: _____	Yes	No	
Do you have any relatives working for FB BanCorp or any of its subsidiaries? If yes, please provide name and position: _____	Yes	No	
Are you currently employed?	Yes	No	
May we contact your present employer?	Yes	No	
Have you been convicted of a felony in the last 7 years? <small>[Requirements to maintain a Surety Bond prevent us from hiring applicants with felony convictions.]</small>	Yes	No	
Date Available for Work: _____	Desired Salary Range: _____		
Available Part Time and Temporary (check all that apply)	Full Time Morning	Part Time Afternoon	Temporary Evening
Will you be able to travel if the job requires it?	Yes	No	

EDUCATION

School	Name & Address of School	Course of Study	# of Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer	Dates Employed		Hourly Rate/Salary	
	From	To	Starting	Final
Present Job Title				
Telephone Number(s)	Address			
Supervisor	Reason for Leaving			
Work Performed				

Employer	Dates Employed		Hourly Rate/Salary	
	From	To		From
Present Job Title				
Telephone Number(s)	Address			
Supervisor	Reason for Leaving			
Work Performed				

Employer	Dates Employed		Hourly Rate/Salary	
	From	To		From
Present Job Title				
Telephone Number(s)	Address			
Supervisor	Reason for Leaving			
Work Performed				

COMMENTS

Include explanation of any gaps in employment.

TRAINING & ACTIVITIES

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

MILITARY SERVICE

Describe any job-related training received in the United States Military.

ADDITIONAL INFORMATION

List professional, trade, business or civic activities and offices held. You may exclude memberships which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

OTHER QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experiences.

SPECIALIZED SKILLS

Skills and/or equipment operated. Please check all that apply.

Terminal

Spreadsheet

Word Processor (WPM_____)

PC/MAC

Copier/Printer

Typewriter (WPM_____)

Shorthand (WPM _____)

Other (Specify) _____

State any additional information you believe may be helpful to us in considering your application.

NOTE TO APPLICANTS

DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a way or occupation has been given. (check one) YES NO

PERSONAL/PROFESSIONAL REFERENCES

Do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

CERTIFICATION

I certify that the answers given herein (and in the accompanying resume, if any) are true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me and may be considered sufficient justification for dismissal if discovered at a later date. I authorize a thorough employment background investigation and agree to cooperate in such investigations. I agree to release from all liabilities or responsibilities, all persons, agencies, and corporations requesting or supplying such information. I understand that if employed, my employment is for no definite period of time and that I may terminate my employment relationship with the company at any time for any reason and that the company has the same right. I also understand that no management official other than the president of the company has any authority to enter into any agreement contrary to the foregoing, or to make any assurance or promise of continued employment. If employment is obtained under this application, I will comply with all rules and regulations of the company. I agree to be responsible for company property and equipment issued to me by the company until returned to the company. I hereby agree to submit to any lawful drug, alcohol, or integrity testing that may be required as a condition of employment or continued employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action up to and including termination. I understand that according to federal law all individuals must, as a condition of employment, produce certain documentation to verify their identity as a U. S. citizen or if aliens, their legal authorization to work in the U. S. A. As a result, I understand that any employment offer would be contingent upon producing the required documentation within the time period required by law.

SIGNATURE OF APPLICANT

Signature of Applicant

Date

APPLICANT DATA RECORD

Please read this. It's Important!

Qualified applicants are considered for employment, and employees are treated during employment without regard to race, color, religion, national origin, citizenship, age, sex, marital status, ancestry, physical or mental disability, veteran status or sexual orientation.

Solely to help us comply with federal and state Equal Employment Opportunity record keeping, reporting, and other legal requirements, we request that you complete this data information questionnaire.

Please note—Completing this form is totally up to you.

If you don't want to, don't worry. It won't affect your job application one bit. If you do choose to complete the form, please know that the information you provide will be kept confidential. It will not be used when considering you for employment.

Date	Position Applied for		
Name			
	_____	_____	_____
	Last	First	Middle

CONFIDENTIAL INFORMATION

VOLUNTARY SURVEY

Check One:

Male

Female

Check one of the following Race/Ethnic Groups:

White

Black

Hispanic

American Indian/Alaskan Native

Asian/Pacific Islander

Veteran Status:

Vietnam Era

Other Era

Both Vietnam and other Era

Neither Vietnam or Other Era

CONSUMER REPORT & CRIMINAL INVESTIGATION AUTHORIZATION

Employees of FB BanCorp and its subsidiaries are required to have acceptable credit histories at the time of hiring and to maintain acceptable credit histories while employed. Therefore, before an applicant is hired, before an employee is promoted, and at other appropriate times, FB BanCorp or its subsidiaries may review the individual's credit history in order to verify compliance with FB BanCorp's policy.

Social Security Number	Position Applied for		
Name			
	_____ Last	_____ First	_____ Middle
Address			
_____ Address	_____ City	_____ State	_____ Zip

SIGNATURE OF APPLICANT OR EMPLOYEE

Applicant or Employee – Please read carefully and sign below:

I understand that to be eligible for employment with FB BanCorp or its subsidiaries, my credit history must be in good standing. I authorize FB BanCorp or its subsidiaries to obtain a consumer credit report about me both before and (in the event I am fired) afterwards for purposes of evaluating my eligibility for employment, promotion or continued employment. I understand that a copy of my credit report and a summary of my rights as a consumer will be provided to me before any decision adversely affecting my employment is made if the decision is based on my credit report.

I also understand and authorize FB BanCorp and its subsidiaries to conduct a Criminal Investigation including Driving Record Investigations as deemed necessary for employment considerations.

Signature of Applicant

Date

Telephone Number



EMPLOYMENT APPLICANT DISCLOSURE & RELEASE FORM

As part of the application process for Employment hiring purposes from **Farm Bureau Bank**, I understand that they and/or its agents may conduct an investigation of my personal information. The investigation might include, but is not limited to names and dates of previous/current addresses and/or employment, database search, criminal history records from state or national, moving violations report, federal and other agencies, bankruptcy records, and credit history. I understand that these records may be used for the eligibility of my employment application. I authorize without reservation the full release of these records for SARMA and/or its agents to obtain information.

I also release and discharge SARMA, and all of its agents and associates, any expenses, losses, damages, liabilities, or any other charges or complaints for the investigative process. I also authorize the full release of the information described above, without any reservation, on behalf of this application for employment and if hired throughout the duration of my employment. I also certify that all information provided is correct on the application to the best of my knowledge. Any false statements provided will be considered just cause for termination of my employment.

SARMA will upon request, supply a copy of the credit report and my rights under the Fair Credit Reporting Act. SARMA can be reached at 1-800-955-5238.

CREDIT/CRIMINAL/MVR/VERIFICATION RELEASE AUTHORIZATION

I hereby authorize SARMA to obtain a credit/criminal report in connection with my application at **Farm Bureau Bank**. I understand that my credit report and the information therein shall be used in compliance with the Fair Credit Reporting Act or appropriate regulations. I also understand that I have a right to obtain a copy of my own credit report and can dispute any information.

I, _____ hereby authorize, without any reservation, any bureau contacted by SARMA to obtain the above credit information.

(Please Print)

Applicant

Last Name

First Name

Middle Name

Applicant

Maiden Name/Former Name

Current Address

Address _____ City _____ State _____ Zip _____

Former Address

Address _____ City _____ State _____ Zip _____

SSN (Applicant)	Date of Birth (Applicant)
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Employer	Employer Contact Name
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Position	Income	Monthly Annually
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Date of Hire	Date of Termination
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Driver License Number (Applicant)	State of Issue
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Signature (Applicant)	Date
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