



ALBINA COMMUNITY BANK

APPLICATION FOR EMPLOYMENT

~ Equal Opportunity Employer ~

This company will make reasonable accommodation in the application process, if needed.

PERSONAL INFORMATION

Name (Last, First, M.I.)		Date	
Street Address (Street, City, State, Zip)			
Mailing Address, if different than above			
Phone Number		Referred by	
Names and Relationship to any Relatives in our Employ			
Social Security Number			

POSITION DESIRED – Applications will be accepted for open positions only

Position Desired			
Date you can start		Salary Desired	
Are you employed now?	<input type="checkbox"/> yes <input type="checkbox"/> No	May we contact your Employer?	<input type="checkbox"/> yes <input type="checkbox"/> No
Have you ever applied to this company before?	<input type="checkbox"/> yes <input type="checkbox"/> No		

EDUCATION

SCHOOL	NAME AND LOCATION	GRADUATED	COURSE OF STUDY
High School		<input type="checkbox"/> yes <input type="checkbox"/> No	
Postgraduate School		<input type="checkbox"/> yes <input type="checkbox"/> No	
Other Education and Training		<input type="checkbox"/> yes <input type="checkbox"/> No	

WORK EXPERIENCE – must be completed even if you are attaching a resume

List your last three employers, beginning with the most recent.							
(1) Employer							
Address				City		State	Zip
From		To		Position Held			
Reason for leaving							
Description of duties							
Supervisor's Name & Title					May we contact?	<input type="checkbox"/> yes <input type="checkbox"/> No	
Starting Salary				Final Salary			

(2) Employer							
Address				City		State	Zip
From		To		Position Held			
Reason for leaving							
Description of duties							
Supervisor's Name & Title						May we contact? <input type="checkbox"/> yes <input type="checkbox"/> No	
Starting Salary				Final Salary			

(3) Employer							
Address				City		State	Zip
From		To		Position Held			
Reason for leaving							
Description of duties							
Supervisor's Name & Title						May we contact? <input type="checkbox"/> yes <input type="checkbox"/> No	
Starting Salary				Final Salary			

AUTHORIZATION AND ACKNOWLEDGEMENTS

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF I AM HIRED, ANY FALSE STATEMENT ON THIS APPLICATION MAY BE GROUNDS FOR DISMISSAL.

The employment application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and as applicable, information concerning my employment, education, general reputation, character, personal characteristics, and habits, and that such information may be developed through personal interviews with third parties such as family members, neighbors, friends, associates, former employers, and custodians of official records. Only job-related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I understand that neither this application nor any written personnel procedure manual or employee handbook is an express or implied contract of permanent employment. I further understand that my relationship with the Company is "at-will" and for an unspecified term and the Company and I each have the right to terminate the employment relationship at any time, with or without cause or advance notice.

I have had an opportunity to have my questions about this statement's content and intent answered and understands its terms.

SIGNED	DATE
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This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application. Please return in person or by mail to Albina Community Bank, Administrative Offices, 430 NW 10th Ave. #101., Portland, OR 97209 (503) 331-3787.