

APPLICATION FOR EMPLOYMENT 100 SOUTH MADISON AVENUE 1011 LAKE OCONEE PARKWAY EATONTON, GA 31024

Farmers & Merchants Bank/Putnam Greene Financial Corporation does not discriminate in hiring or employment on the basis of race, color, religion, national origin, sex, age, disability or any other factor prohibited by law or regulation. This application nor its questions are based on any intent to secure information for discrimination purposes.

Please print clearly when completing.

Date of Application Submission:				
PERSONAL				
Full Name	Social Security #			
Street Address	Phone #			
City, State, Zip Code				
Email				
Are you at least 18 years of age?				
If not 18, please list your age and date of birth				
Parent or Guardian's Name and Address if you are under 18:				
How were you referred to us?				
PLACEMENT				
Type of Position you are seeking? Regular Full-time Regular Part-time	emporary Full-time Temporary Part-time			

Starting Salary you are seeking?	per
When are you available to begin employment?	
EDUCATION	
High School Years Completed Name/Address o	f School
Other Explain	
You may be asked for a copy of your HS Diploma, GED, job interview process. However, not necessarily a require	or College Diploma if selected for the ement to have a degree for hiring.
College Degree If no, how many	y years if any?
Name and Address of School	
Major Course of Study	
List any special training, certifications, skills or experience your interests and areas of specialty. Include things that y us. (You may wish to include activities and positions held organizations, professional societies, etc. You are reques disclose your race, color, religion, or national origin.	ou feel qualify you for a position with
EMPLOYMENT HISTORY	

Have you ever worked for Farmers & Merchants Bank?☐☐ Yes☐No
If yes, fromto
May we contact your current employer? YesNo
Please list your employment history in chronological order with most recent first:
Present or Last Employer:
Name & Title of Supervisor:
Address:
Phone #:
Dates FromtoSalary \$
Starting PositionEnding Position
Reason for Leaving:
Previous Employer:
Name & Title of Supervisor:
Address:
Phone #:
Dates Fromto Salary \$
Starting PositionEnding Position
Reason for Leaving
Previous Employer:
Name & Title of Supervisor:

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Address:			
Phone #:			
Dates From		Salary \$	
Starting Position			
Reason for Leaving	The state of the s		
Previous Employer:			•
Name & Title of Supervisor:			
Address:	to the second se		
Phone #.			
Dates From	to	Salary \$	
Starting Position		Ending Position	
Reason for Leaving			
MILITARY SERVICE			
Branch of Service		Major Duties	
Service Schools Attended			
Date Entered		Reserve Status	
Starting Rank		Separation Rank	
REFERENCES (Not Related to) Applica	ant)	
Name:			

Address:
Phone #:
Occupation:
Name:
Address:
Phone #:
0ccupation:
Name:
Address:
Phone #:
0ccupation:
GENERAL INFORMATION
Have you ever been convicted of a criminal offense (excluding minor traffic
offenses)YesNo If yes, please describe in full
Are you a U.S. Citizen?YesNo
Are you authorized to work in the United States?YesNo

INVESTIGATIVE REPORTS

I hereby authorize Farmers & Merchants Bank to obtain an investigative consumer report which may include information as to my character, general reputation, credit report, police record, personal characteristics and mode of living. I have the right to request that Farmers & Merchants Bank completely and accurately disclose to me the nature and scope of the investigation requested.
In hereby authorize Farmers & Merchants Bank to receive any Georgia Criminal History Record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.
I acknowledge that I have read the foregoing disclosure statement and I understand the rights I have.
Signature of Applicant:Date:
SIGNATURE
We make no promise of employment by offering this application form or accepting your written esponse.
Any employment we may offer you will be terminable <u>at will</u> . This means you can quit at any ime. It, also, means we can terminate you at any time, with or without cause.
By completing this application and signing below, you authorize us to share this application and its content with our employees and any outside agencies or representatives we deem appropriate. If there is anyone you do not want us to contact, please tell us in writing.
By signing below you are affirming that the statements you make in this application, plus any additional written and oral information you provide us about yourself (such as a resume or atterview) are true, and that you have not omitted anything about yourself that might be viewed as deceptive in nature.
Signature of ApplicantDate: