



**GREENVILLE NATIONAL BANK**

446 South Broadway  
Greenville, OH 45331

**Telephone** 937-548-1114

**Fax** 937-548-0650

**www.bankgnb.bank**

**Equal Opportunity Employer**

## Employment Application

We consider applicants for all positions without regard to race, color, religion, sex, military status, national origin, disability, age, ancestry, genetic information, veterans or any other basis protected by federal, state, or local law. Also in accordance with the Americans with Disabilities Act and/or applicable state and local laws, applicants requiring reasonable accommodations should notify the Human Resource Department during the application or interview process.

### Personal Information

Last Name	First	Middle	Date	
Address	City		State	Zip
Email Address	Mobile Number		Home Number	Other

### Employment

Position(s) applied for	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Other	Salary Desired
Are you employed now?	<input type="checkbox"/> Under Age 18	Date Available for Work
Referral Source (Employment Agency, Advertisement, Walk-In, Employee, Etc.)	Other name(s) used	Have you ever been employed by us? <input type="checkbox"/> Yes, When _____ <input type="checkbox"/> No
Are you lawfully authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been Bonded?	Have you ever committed a Felony?

### Educational Background

School, City & State	Years Completed	Degree	GPA	Major/Minor

Are you planning to pursue further studies? If so, when and where \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Former Employer(s)** (Begin with most recent)

Employment Dates	Name of Employer	Salary	Position	Reason for Leaving
From      To				
From      To				
From      To				
From      To				
From      To				

**References**

Name	Company	Relationship to You	Years Known	Telephone Number

**Employment History**

Explain any gaps in your employment, other than those due to personal illness, injury, or disability, \_\_\_\_\_

---



---

Have you ever been fired or asked to resign from a job? If yes, please explain further, \_\_\_\_\_

---



---

**Skills and Qualifications**

Summarize any special skills or training including certifications you may have received which may assist in the position you are applying for:

---



---

**Other Information**

Job related organizations or profession trade groups you belong to \_\_\_\_\_

---



---

Special awards or accomplishments you have received \_\_\_\_\_

---



---

Volunteer work you have done or are now doing relevant to position applying for \_\_\_\_\_

Other job-related information you want to share with us \_\_\_\_\_

What is your greatest strength \_\_\_\_\_

What are your goals in five or ten years \_\_\_\_\_

Do you have a valid Driver's License  Yes  No

Has your Driver's License ever been revoked or suspended?  Yes  No Please explain \_\_\_\_\_

### Background and Credit Authorization

I authorize Greenville National Bank to obtain information regarding my creditworthiness, character, general reputation, personal characteristics, mode of living and standing from any outside source that provides such information. I understand such information may be used by GNB in making a decision regarding my employment. A separate form will be required at a later date, if employment is offered in order to obtain the necessary Credit Report and Background Check.

I certify that the facts contained herein are true and complete to the best of my knowledge; however, if employed, falsified statements on this Application shall be grounds for dismissal.

Applicant's Signature	Date
-----------------------	------

**Please return complete application by Mail, In Person, On-line or Email to:**

Greenville National Bank  
Attn: Human Resource Department  
446 S. Broadway  
Greenville, OH 45331

Email To: HR@bankgnb.bank



## Applicant Voluntary Information Form

In order for us to meet federal record keeping requirements, we request that you answer the following personal questions. This information is voluntary and refusal to provide it will not result in any adverse treatment. This information will not be used for any purpose in the employee selection process. If you have any questions about this questionnaire, please do not hesitate to ask to speak to a representative of the Human Resources Department.

Name	Date	<input type="checkbox"/> Female <input type="checkbox"/> Male
Position applying for (if known)		Last 4 digits of SS number

**Indicate how you learned about the position by checking one of the following:**

- |                                   |                                                |                                      |
|-----------------------------------|------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Agency   | <input type="checkbox"/> Company Employee      | <input type="checkbox"/> Website     |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Newspaper             | <input type="checkbox"/> Facebook    |
| <input type="checkbox"/> Referral | <input type="checkbox"/> Resume or Application | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> School   |                                                |                                      |

**Ethnicity Origin:**

Are you Hispanic or Latino? Hispanic or Latino is defined as a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

(Answer next question (**Race and Ethnic origin**) ONLY if you answer "No" to **Ethnicity Origin** question.)

**Race and Ethnic origin (check one):**

- Ethnicity:*
- Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- Race:*
- White (not Hispanic or Latino):** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
  - Black/African American:** Persons having origins in any of the Black racial groups of Africa.
  - Asian (not Hispanic or Latino):** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
  - Native Hawaiian or Other Pacific Islander (not Hispanic or Latino):** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.
  - American Indian or Alaskan Native (not Hispanic or Latino):** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community recognition, and
  - Two or More Races (not Hispanic or Latino):** All persons who identify with more than one of the above five races.

**Disability (check one)**

If you have a disability and wish to request an accommodation, please contact the Director of Human Resources.

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

**Veteran Status (check one):**

- Disabled Veteran – any veteran of the U. S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) or a person who was discharged or released from active duty because of a service-connected disability.
- Other Protected Veteran – a veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized
- Veteran who separated from the service less than three years ago.  
(If yes, provide date of separation: \_\_\_\_\_)
- Armed Forces Service Medal Veteran – any veteran who, while serving on active duty, participated in a U. S. military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.
- I am a protected Veteran, but I choose not to self-identify the classifications to which I belong.
- I am Not a protected veteran.
- No veteran status.

Signature	Date
-----------	------