

APPLICATION FOR EMPLOYMENT

Please note only applications with original ink signatures will be accepted. Please print and sign and return to us at the address above.

Bank of New Hampshire is an equal opportunity employer committed to employment based on merit, without discrimination on the basis of age, race, color, gender or gender identity, sexual orientation, national origin, religion, disability, protected veteran status and other protected classifications.

PERSONAL DATA (PLEASE PRINT)

Date of Application: _____ Social Security No. _____

Name: _____
Last First Middle

Current Address: _____
No. Street City State Zip

Mailing Address: _____
(If different) No. Street City State Zip

Primary Phone: _____ Alternate/Cell Phone: _____

E-Mail Address: _____

SELECT ONE:

YES NO I am legally authorized to work in the United States. I understand that if I am hired, I will be required to provide proof of eligibility to work in the U.S.A.

YES NO I am over the age of 18.

YES NO I am at least 16 years old, and can furnish the required work permits.

Have you ever been convicted of a felony? YES NO (NOTE: a felony conviction may not prevent consideration for employment)
If YES, please indicate date(s) and nature of conviction(s): _____

Position and Location Applying for: _____

Referral Source (choose one): Were you referred to us by a current employee? If so, whom? _____

Other referral sources: Company Web Site Internet Other (Please Describe): _____

Date available to start work: _____ Desired Salary: _____

Have you ever applied to or been employed by this institution in the past? YES NO

If yes, when? _____

Do you possess any specialized skills, certification or training that would be applicable to your position of interest? Please use back page if additional space is required: _____

DO NOT WRITE BELOW THIS LINE – FOR OFFICE USE ONLY

CRD	FRB/ GOVT	PI	ACCT VERIFY	CRIM	REF	DMV	WORK LOCATION	RATE
							POSITION	START DATE/LOCATION

EDUCATION

	Name of School	Years Attended	Course of Study	Highest Level Completed	Graduated?
High School					YES NO
College					YES NO
Trade or Technical School					YES NO
Graduate or Professional Studies					YES NO

EMPLOYMENT HISTORY

Please complete the following, listing your current or most recent employer first, utilizing the back page if additional space is required.
Please Note: Your resume may be included as an attachment; however the information requested below is required to complete your application.

Employer Name								
Street Address								
City/State/Zip								
Phone Number								
Dates of Employment	From	To	From	To	From	To	From	To
Position/Job Title								
Supervisor Name								
May we contact this employer?	Yes_____	No_____	Yes_____	No_____	Yes_____	No_____	Yes_____	No_____
Starting Salary								
Ending Salary								
Primary Responsibilities								
Reason(s) for Leaving								

REFERENCES

Please list the names and contact information for at least three personal or professional references not related to you by birth or marriage

Name	Company	Title/Position or Nature of Relationship	Phone Number	Email Address

I authorize Bank of New Hampshire to contact the references listed above to discuss my work experience, personal character, or other information relating to potential employment with Bank of New Hampshire.

Signed _____

Date _____

DISCLOSURE

In connection with your application for employment with **Bank of New Hampshire** or, if you become employed here, at any time during your employment with **Bank of New Hampshire** by signing the attached *Authorization for Release of Information*, you have authorized **Bank of New Hampshire** to conduct a complete investigation into your background, including, but not limited to, obtaining a consumer report which may include your credit record, criminal background checks and employment and educational references, your entire employment history, including fitness for duty at all prior employment and reasons for leaving; educational history; military record; to obtain opinions and references regarding your moral character and reputation and to solicit and obtain any other information. **Bank of New Hampshire** in its sole and absolute discretion deems necessary to determine your eligibility for employment, including but not limited to confirming the accuracy or completeness of any information you have provided to **Bank of New Hampshire** in connection with your application for employment.

Print Name

Signature

Date

PLEASE READ AND SIGN BELOW:

The facts set forth above in my application for employment are true and complete to the best of my knowledge. I understand that, if I am employed, any false statement on this document may result in dismissal. I further understand that this application is not nor intended to be a contract of employment, nor does this application obligate Bank of New Hampshire in any way if I am hired. I understand and agree that my employment is at-will and can be terminated at any time by either party with or without notice, for any reason or for no reason. No one other than an officer of Bank of New Hampshire has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing signed by an officer.

Signed _____

Date _____

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____, in consideration of **Bank of New Hampshire** ("BNH") processing my application for employment, hereby authorize **BNH** and its parents, affiliates, subsidiaries, officers, directors, employees, representatives, and agents, including but not limited to ADP (hereinafter collectively referred to as BNH) to conduct a complete investigation into my background, including but not limited to a consumer report which may include credit records/reports, criminal background checks, employment and educational references, my entire employment history, including fitness for duty at all prior employment and reasons for leaving, education history, military record, if any, to obtain opinions and references regarding my moral character and reputation and to solicit and obtain any other information BNH, in its sole discretion, deems necessary to determine my eligibility for employment or for the purpose of confirming the accuracy or completeness of any information I have provided to BNH.

In consideration for the processing of my application for employment with **Bank of New Hampshire**, I hereby RELEASE, INDEMNIFY, AND HOLD HARMLESS **BNH** and all previous employers and other persons and organizations furnishing information in connection with **Bank of New Hampshire's** investigation into my background from any and all liability based on their authorized receipt, disclosure, and use of the information gathered in processing my application for employment with **Bank of New Hampshire**.

I have acknowledged a separate Disclosure Statement contained in my employment application providing that **Bank of New Hampshire** may conduct a complete investigation into my background in connection with my employment application, and should I become employed by **Bank of New Hampshire** that at any time during my employment with it, it may update such investigation including obtaining an updated consumer report and/or criminal record check.

Name: _____
First Middle Last Maiden

Driver's License Number & State: _____

Social Security #: _____ Telephone #: _____

Address: _____

City, State: _____ Zip Code: _____

Date: _____ Signature: _____

If any additional information relative to change of name or use of an assumed name or nickname is necessary to enable a check on your background, please explain below.

Applicant Invitation to Voluntarily Self-Identify

Bank of New Hampshire is an Equal Opportunity employer and voluntarily complies with the laws and regulations associated with Affirmative Action that are related to employment. The bank is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations.

In order to comply with these laws, the employer invites each applicant to **VOLUNTARILY** self-identify their gender, race and ethnicity. Submission of this information is **voluntary** and refusal to provide it will not subject you to any adverse treatment.

The information will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

Gender

Male

Female

Ethnicity/Race

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

If you answered "No" to the above question, please select **one** race/ethnicity category from the list below that you **PRIMARILY** identify with.

a. **White**--A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

b. **Black or African American**--A person having origins in any of the Black racial groups of Africa.

c. **Native Hawaiian or Other Pacific Islander**--A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

d. **Asian**--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.

e. **American Indian or Alaska Native**--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 attachment.

f. **Two or More Races**--All persons who identify with more than one of the above races marked **b** through **f**.

g. I do not wish to provide this information.

Name (please print): _____

Signature: _____

Date: _____

Applicant Invitation to Self-Identify as a Protected Veteran

Bank of New Hampshire is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires Government contractors to take affirmative action to employ and advance in employment the classifications of protected veterans as defined below.

Submission of this information is **voluntary** and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are not inconsistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended.

Definitions

A “**disabled veteran**” is one of the following:

- a 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) under laws administered by the Secretary of Veterans Affairs; or
- a person who was discharged or released from active duty because of a service-connected disability.

A “**recently separated veteran**” means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.

An “**active duty wartime or campaign badge veteran**” means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.

An “**Armed forces service medal veteran**” means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. As a Government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA. The information you submit will be kept confidential.

I identify as one or more of the classifications of protected veteran listed above

I am not a protected veteran

Protected veterans may have additional rights under the Uniformed Services Employment and Reemployment Rights Act (USERRA). For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.

Under the Affirmative Action obligations imposed by VEVRAA, as amended, it is the policy of Bank of New Hampshire to provide Equal Employment Opportunities and to advance in employment qualified protected veterans. This policy is designed to employ and advance all qualified protected veterans at all levels of employment, including the executive level, and shall apply to all employment practices including, but not limited to: upgrading, demotion or transfer, layoff or termination, rates of pay or other forms of compensation, and selection for training. The company attempts to comply with all of the rules, regulations, and relevant orders of the Secretary of Labor and the Office of Federal Contract Compliance Programs (OFCCP), issued pursuant to the 1974 Vietnam Era Veterans' Readjustment Assistance Act, as amended.

The company's Affirmative Action Program for qualified protected veterans is reviewed and updated annually. If there are any significant changes in the company's procedure, or if employee rights or benefits are modified as a result of an annual updating, these changes are communicated to employees and to applicants for employment.

Name (please print): _____ Signature: _____ Date: _____