

# Application for Employment

**The First National Bank**  
101 E. Bridge Street/P.O. Box 400  
Granbury, Texas 76048

The First National Bank (“FNB”) of Granbury is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

If you require accommodation of a disability in order to complete any portion of the application process, please inform the Human Resources Representative at 817 573 2655. So that we can have the best opportunity to provide necessary and reasonable accommodation, we ask that you give us as much notice as possible prior to the need.

*Instructions:* In filling out your application, you are requested to furnish complete and accurate information about yourself, your employment history, your education and the position applied for. All applications are verified. A false or incomplete application will not be considered and can be used as a reason for discharge.

**Please complete the *entire* application and all accompanying documents. You may return the *completed* package to any of our locations during our normal business hours.**



Date: \_\_\_\_\_

**Position Applied For**

**Job/Function:** \_\_\_\_\_ Referred by: \_\_\_\_\_

Hourly Pay Desired: \_\_\_\_\_ Date available for work: \_\_\_\_\_ Full-time?: **Y N** Part-time?: **Y N**

Can you work Saturdays? \_\_\_\_\_ Can you work overtime when necessary? \_\_\_\_\_

**Personal Information**

**Social Security #:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Initial:** \_\_\_\_\_

Other Names Used While Employed: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_ How Long?: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_ How Long?: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Business/Message Phone #: \_\_\_\_\_

Have you ever interviewed with FNB before? **Y N** If yes, list date: \_\_\_\_\_

Have you ever been employed by FNB before? **Y N** If yes, list start & end dates: \_\_\_\_\_

Do you have any relatives employed by FNB? **Y N** If yes, list name(s): \_\_\_\_\_

Do you reside with any employees of FNB? **Y N** If yes, list name(s): \_\_\_\_\_

Are you at least 18 years of age? **Y N**

List all special skills you possess and machines or office equipment you can use such as calculators, computer equipment and software, etc.

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*Answer this question only if the position requested requires driving*

- Driver's license # \_\_\_\_\_ State: \_\_\_\_\_ Expire Date: \_\_\_\_\_
- Provide a copy of your current auto insurance declarations page.

**References** – Please list three people, not related to you, whom you have known at least three years. They should be able to help us determine your qualifications for the position you requested.

Name	Address	Occupation	Phone #
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

**Employment History** (Present or most current job first. Use extra paper if needed and account for ALL gaps in employment).

Start Date: \_\_\_\_\_ Employer Name: \_\_\_\_\_  
 End Date: \_\_\_\_\_ Employer Address: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_ Supervisor Phone #: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_  
 Duties and Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

Start Date: \_\_\_\_\_ Employer Name: \_\_\_\_\_  
 End Date: \_\_\_\_\_ Employer Address: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_ Supervisor Phone #: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_  
 Duties and Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

Start Date: \_\_\_\_\_ Employer Name: \_\_\_\_\_  
 End Date: \_\_\_\_\_ Employer Address: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_ Supervisor Phone #: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_  
 Duties and Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

Start Date: \_\_\_\_\_ Employer Name: \_\_\_\_\_  
 End Date: \_\_\_\_\_ Employer Address: \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_ Supervisor Phone #: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_  
 Duties and Responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_

**Education and Training**

Check Highest Grade or Year Completed:	High School	9	10	11	12	
	College (# of years)	1	2	3	4	5+
	Trade/Business School (# of years)	1	2	3	4+	

School	City/State	Major Studies	Diploma, Highest Degree Earned, License or Certificate
High School	_____	_____	_____
College	_____	_____	_____
Trade/Business	_____	_____	_____

Describe any continuing education or other training that further qualifies you for the position applied for: \_\_\_\_\_  
 \_\_\_\_\_

May we contact your current employer for references?      Y      N

Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation?

Have you ever been convicted, pled guilty or received deferred adjudication for a crime (other than minor traffic offenses)? If Yes, please explain and give dates:

(Answering "Yes" will not necessarily exclude you from employment).

Are there any felony charges pending against you?

Are you currently authorized to work in the United States (proof of authorization will be required within the first three days of employment and failure to provide such proof will result in immediate termination, as required by law?

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED**

I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete and I understand that any misstatement, falsification or omission of information may be grounds for refusal to hire or, if hired, termination. This applies regardless of the time elapsed after its discovery.

I understand that FNB will verify my personal information, employment history, education, training and references as needed to research my qualifications for this position. I further understand that FNB will verify my credit history and will perform background checks on me through law enforcement agencies. And if I am applying for employment requiring driving I understand that FNB will also investigate my driving record.

I acknowledge that nothing in this Application For Employment, the granting of an interview or even my subsequent employment with FNB is intended to create an employment contract between myself and FNB under which my employment could be terminated only for cause. On the contrary, I understand and agree that, if hired, my employment will be terminable **at will** and may be terminated by me or FNB at any time and for any reason. I understand that no agreement or promise regarding my employment is binding on the Bank unless it is in writing and signed by the Bank's President.

I understand that FNB may require me as an applicant for employment to consent and submit to and pass a drug test as a prerequisite to employment. I also understand that FNB may require me as an applicant for employment to consent and submit to a search of my personal belongings and my vehicle as a prerequisite to employment. My refusal to consent and submit to either or both the drug test and/or the search may constitute grounds for the termination of consideration for employment.

I also understand that this application will remain active for six months from the date below.

I hereby acknowledge that I have read and agree to the above statements and affirm them as my own.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date