



Application For Employment

To apply, complete the application and fax to (602) 523-8249, or mail to P.O.Box 11650, Attn: HR Dept, Phoenix, AZ 85061-1650, or bring in to any one of our branch locations. **We consider applicants for all positions without regard to race, color, religion, gender, national origin, age, marital or veteran status, disability, or any other legally protected status.**

PERSONAL INFORMATION (PLEASE PRINT CLEARLY)

LAST NAME	FIRST NAME	MIDDLE NAME	
ADDRESS	CITY	STATE	ZIP CODE
PRIMARY TELEPHONE NUMBER	ALTERNATE PHONE NUMBER	E-MAIL ADDRESS	
POSITION(S) OF INTEREST			DATE OF APPLICATION

HOW DID YOU LEARN ABOUT US?

<input type="checkbox"/> Jobing.com	<input type="checkbox"/> Job Fair Location:	<input type="checkbox"/> Current ACCU Employee Referral Name:
<input type="checkbox"/> ACCU Website	_____	_____
<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Name of Relative Currently Employed at ACCU: _____

PLEASE CHECK THE LOCATION(S) YOU ARE AVAILABLE TO WORK:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> 2020 N CENTRAL AVE
(CORPORATE OFFICE)
PHOENIX, AZ 85004 | <input type="checkbox"/> 5552 W GLENDALE AVE
GLENDALE, AZ 85301 | <input type="checkbox"/> 3350 S PRICE RD
TEMPE, AZ 85282 | <input type="checkbox"/> 4451 S WHITE MOUNTAIN RD
SHOW LOW, AZ 85901 |
| <input type="checkbox"/> 1805 W CHANDLER BLVD
CHANDLER, AZ 85224 | <input type="checkbox"/> 2150 W INA RD
TUCSON, AZ 85741 | <input type="checkbox"/> 2521 N WEST ST
FLAGSTAFF, AZ 86004 | <input type="checkbox"/> 1948 S WOODLANDS VILLAGE BLVD
FLAGSTAFF, AZ 86001 |
| <input type="checkbox"/> 787 S ALVERNON WAY
TUCSON, AZ 85711 | <input type="checkbox"/> 6901 WEST BELL RD
GLENDALE, AZ 85308 | <input type="checkbox"/> 3329 EAST BELL RD
PHOENIX, AZ 85032 | |

SCHEDULING AVAILABILITY:

<input type="checkbox"/> FULL TIME- 40 HRS/WK	<input type="checkbox"/> AVAILABLE IMMEDIATELY
<input type="checkbox"/> PART TIME- HOW MANY HOURS? _____	<input type="checkbox"/> DATE AVAILABLE _____

WHAT IS YOUR DESIRED WAGE PER HOUR? _____

DAYS AVAILABLE	ANY TIME	EARLIEST TIME AVAILABLE	LATEST TIME AVAILABLE
<input type="checkbox"/> MON	<input type="checkbox"/>		
<input type="checkbox"/> TUES	<input type="checkbox"/>		
<input type="checkbox"/> WED	<input type="checkbox"/>		
<input type="checkbox"/> THUR	<input type="checkbox"/>		
<input type="checkbox"/> FRI	<input type="checkbox"/>		
<input type="checkbox"/> SAT	<input type="checkbox"/>		

ELIGIBILITY

	YES	NO
Are you legally eligible for employment in the US? <i>(Proof of identity and employment eligibility status will be required upon employment)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a felony? <i>(Conviction will not necessarily disqualify an applicant from employment)</i> If Yes, please explain:	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been convicted of a misdemeanor that involved theft or any dishonest crimes? If Yes, please explain:	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had any bond coverage modified or revoked?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever had an application for a bond be denied?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been employed with Arizona Central Credit Union before? If Yes, when and in what position:	<input type="checkbox"/>	<input type="checkbox"/>

EDUCATION

	HIGH SCHOOL				UNDERGRADUATE COLLEGE/ UNIVERSITY				GRADUATE/PROFESSIONAL			
SCHOOL NAME												
LOCATION (CITY, STATE)												
YEARS COMPLETED (SELECT ALL OR HIGHEST)	9	10	11	12	1	2	3	4	1	2	3	4
GRADUATE?	<input type="checkbox"/> YES		<input type="checkbox"/> NO		<input type="checkbox"/> YES		<input type="checkbox"/> NO		<input type="checkbox"/> YES		<input type="checkbox"/> NO	
DIPLOMA/DEGREE RECEIVED	<input type="checkbox"/> DIPLOMA		<input type="checkbox"/> GED		IF YES, DEGREE:				IF YES, DEGREE:			
DESCRIBE COURSE OF STUDY												
DESCRIBE ANY SPECIALIZED TRAINING AND/OR SKILLS THAT WOULD BE OF BENEFIT ON THE JOB												
DESCRIBE ANY HONORS OR AWARDS YOU HAVE RECEIVED												

SPECIAL SKILLS (PLEASE CHECK ALL THAT APPLY)

- CASH HANDLING
 MICROSOFT WORD
 MICROSOFT OFFICE
 10-KEY BY TOUCH
 MICROSOFT EXCEL
 TYPING _____ WPM

COMPUTER/HARDWARE/SOFTWARE KNOWLEDGE: _____

INDICATE ANY ADDITIONAL LANGUAGES YOU CAN SPEAK, READ AND/OR WRITE

	FLUENT	INTERMEDIATE
SPEAK		
READ		
WRITE		

EMPLOYMENT EXPERIENCE

Start with your current or most recent job.

Please explain all employment gaps under additional information on following page.

CURRENT/MOST RECENT EMPLOYER				JOB TITLE			
ADDRESS				CITY		ST	ZIP
SUPERVISOR NAME				TELEPHONE NUMBER(S)			
EMPLOYED FROM		EMPLOYED TO		STARTING SALARY		ENDING SALARY	
DUTIES PERFORMED							
REASON FOR LEAVING				MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
PREVIOUS EMPLOYER				JOB TITLE			
ADDRESS				CITY		ST	ZIP
SUPERVISOR NAME				TELEPHONE NUMBER(S)			
EMPLOYED FROM		EMPLOYED TO		STARTING SALARY		ENDING SALARY	
DUTIES PERFORMED							
REASON FOR LEAVING				MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
PREVIOUS EMPLOYER				JOB TITLE			
ADDRESS				CITY		ST	ZIP
SUPERVISOR NAME				TELEPHONE NUMBER(S)			
EMPLOYED FROM		EMPLOYED TO		STARTING SALARY		ENDING SALARY	
DUTIES PERFORMED							
REASON FOR LEAVING				MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
PREVIOUS EMPLOYER				JOB TITLE			
ADDRESS				CITY		ST	ZIP
SUPERVISOR NAME				TELEPHONE NUMBER(S)			
EMPLOYED FROM		EMPLOYED TO		STARTING SALARY		ENDING SALARY	
DUTIES PERFORMED							
REASON FOR LEAVING				MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			
PREVIOUS EMPLOYER				JOB TITLE			
ADDRESS				CITY		ST	ZIP
SUPERVISOR NAME				TELEPHONE NUMBER(S)			
EMPLOYED FROM		EMPLOYED TO		STARTING SALARY		ENDING SALARY	
DUTIES PERFORMED							
REASON FOR LEAVING				MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			

ADDITIONAL INFORMATION (EXPLAIN ANY EMPLOYMENT GAPS AND/OR STATE ANY INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION)

REFERENCES (PLEASE LIST THREE BUSINESS REFERENCES WHO WILL BE WILLING TO TALK WITH US AND CAN ATTEST TO YOUR ABILITY AND CHARACTER.) DO NOT LIST FRIENDS/RELATIVES.

NAME	BUSINESS RELATIONSHIP (SUPERVISOR OR CO-WORKER)	YEARS KNOWN
NAME OF BUSINESS	ADDRESS OF BUSINESS	
TELEPHONE NUMBER		
NAME	BUSINESS RELATIONSHIP	YEARS KNOWN
NAME OF BUSINESS	ADDRESS OF BUSINESS	
TELEPHONE NUMBER		
NAME	BUSINESS RELATIONSHIP	YEARS KNOWN
NAME OF BUSINESS	ADDRESS OF BUSINESS	
TELEPHONE NUMBER		

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

APPLICANT NAME (PLEASE PRINT): _____

SIGNATURE OF APPLICANT

DATE