



Application for Employment

We are pleased that you are interested in applying for a position with our Company. Regional Missouri Bank is an equal opportunity employer and does not discriminate in hiring or employment practices on the basis of race, color, religious creed, national origin, age, sex, marital status, ancestry, veteran status, pregnancy, medical condition, citizenship status, genetic information, sexual orientation, gender identity, disability or other basis prohibited by applicable local, state, or federal law. No question on this form is intended to secure information to be used for such discrimination.

Personal Information: Please print in ink.

Position(s) applying for _____

Date _____

Full Time Part Time Any Shift

Name _____

Last
First
Middle Initial

E-mail Address _____

Preferred Name _____ Telephone (____) _____ Daytime Number (____) _____

Address _____

Street or PO Box
City
State
Zip

Have you ever worked under a different name? Yes No If yes, what name? _____

Have you ever been employed by us? Yes No If yes, when? _____

Do you have any relatives working here? Yes No If yes, indicate name and relationship: _____

Are you 18 years of age or older? Yes No Have you ever been bonded? Yes No

Are you legally eligible for employment in the United States? Yes No

Note: Proof of eligibility will be required within three working days of employment.

Are you capable of performing the essential functions required for the position for which you are applying with or without an accommodation? Yes No

Have you ever pled guilty, "no contest" to, or been convicted of a felony? Yes No

If yes, please give the date(s) and details: _____

Note: Answering "Yes" to the question above does not constitute an automatic bar from employment. Factors such as age, time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

Education and Training:

	Name and Location of School	Course of Study	Last Grade Completed	Did you Graduate?	Degree, Diploma, GED, Certificate or other
High School			9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/University			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Post Graduate			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business/Trade Technical			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Special Skills, Training or Qualifications: Describe any computer skills, specialized skills, training and qualifications you possess and/or internships you feel are relevant to the position for which you are applying.

Employment Experience: Beginning with your most recent position, enter your employment information here.

May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current or Most Recent Employer	Supervisor's Name & Title
Address	Dates Employed (indicate month/year) From: _____ To: _____
Telephone Number	Job Title Average Hours Worked Per Week
Reason for Leaving	Hourly Rate or Annualized Salary \$ _____
Describe Major Work Duties	

May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Previous Employer	Supervisor's Name & Title
Address	Dates Employed (indicate month/year) From: _____ To: _____
Telephone Number	Job Title Average Hours Worked Per Week
Reason for Leaving	Hourly Rate or Annualized Salary \$ _____
Describe Major Work Duties	

May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Previous Employer	Supervisor's Name & Title
Address	Dates Employed (indicate month/year) From: _____ To: _____
Telephone Number	Job Title Average Hours Worked Per Week
Reason for Leaving	Hourly Rate or Annualized Salary \$ _____
Describe Major Work Duties	

May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Previous Employer	Supervisor's Name & Title
Address	Dates Employed (indicate month/year) From: _____ To: _____
Telephone Number	Job Title Average Hours Worked Per Week
Reason for Leaving	Hourly Rate or Annualized Salary \$ _____
Describe Major Work Duties	

Professional References: Please provide the names and telephone numbers of additional supervisors, coworkers, or other individuals that may be contacted to provide a reference.

Name	Relationship	Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Availability: Please list your availability for work, including the day(s) of the week and specific time(s) of the day.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hours Available	_____	_____	_____	_____	_____	_____	_____

How many hours per week would you like to work? _____ On what date would you be available for work? _____

Rate of pay expected \$ _____ (per hour or annualized salary)

How did you hear about a position with us? _____

Location Preference(s)

- | | | |
|---|--|--|
| <input type="checkbox"/> Glasgow Branch
601 First Street
Glasgow, MO 65254
660-338-2236 | <input type="checkbox"/> Keytesville Branch
400 West Bridge Street
Keytesville, MO 65261
660-288-3233 | <input type="checkbox"/> Marceline Downtown Branch
100 South Main Street
Marceline, MO 64658
660-376-2007 |
| <input type="checkbox"/> Marceline Main Branch
1201 S Missouri Ave.
Marceline, MO 64658
660-376-2077 | <input type="checkbox"/> Paris Branch
301 N Main Street
Paris, MO 65275
660-327-4175 | <input type="checkbox"/> Salisbury Branch
301 E Hwy 24
Salisbury, MO 65281
660-388-6060 |

Applicant's Statement: Please read statements below carefully before signing this employment application disclosure.

I certify that the answers provided on this application are true, accurate and complete. I understand that any false information, omissions, or misleading information contained in this application or during the interview process, may be grounds for refusal to hire or may result in immediate termination. I acknowledge the confidential nature of the Company's business and agree to maintain the confidentiality of the business affairs of the Company and its customers, at all times, before, during and after my employment.

I acknowledge that an offer and acceptance of employment is of an "**at will**" nature, which means that I may resign at any time and the employer may discharge me at any time with or without cause. I further understand that no supervisor, manager or representative of Regional Missouri Bank has any authority to enter into an agreement for employment for any specific period of time or to make any agreement contrary to these terms of employment, except such person or persons to whom such authority has been specifically granted by Regional Missouri Bank.

For employment purposes and with my prior written consent, the Company may investigate my driving record and/or obtain consumer reports on me from time to time during my employment. I understand, if hired, I will be required to provide proof of identity and legal authorization to work in the United States. I also understand that Regional Missouri Bank participates in the United States Department of Homeland Security E-Verify program and may utilize the Social Security Number Verification Service for wage reporting purposes. I understand that, if hired, a criminal background check will be conducted and my employment is contingent upon the results of that check as it pertains to my job duties.

I understand that my application for employment shall remain in Regional Missouri Bank's active files for a period of one year. Active files will be purged of applications and/or resumes on file for more than one year. If I wish to extend my candidacy, I must reapply by submitting another employment application.

I hereby authorize all previous employers, to release to Regional Missouri Bank any and all information regarding my employment. In addition, I authorize Regional Missouri Bank to contact and obtain information from all references, employers, public agencies, licensing authorities and educational institutions to verify the accuracy of all information. I hereby further release Regional Missouri Bank, and any and all of its employees, of liability relating to, lawfully seeking and using truthful and non-defamatory information in the employment process.

I have carefully read, understand and will comply with all aspects of the employment disclosures stated in this document, and understand that completion of this application is not to be considered an offer of employment.

Signature of Applicant

Date

Affirmative Action: Voluntary Self Identification Form for Applicants

Regional Missouri Bank is a government contractor and an Equal Opportunity Employer. As required by law, we must record certain information to as a part of our Affirmative Action Program.

Applicants for employment are invited to self-identify their race/ethnicity, veteran, gender, and disability status. In extending this invitation you are also advised that: (a) applicants are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the confidential information requested below to Kimberly Corbin. Thank you for your cooperation.

Section 1: General Information

Name _____

Date ____ / ____ / ____

Address _____

Telephone (____) _____

Position Applied for _____

Section 2: In each category, please check all that apply (see reverse page for definitions)

Race or Ethnic Identity

- Hispanic or Latino
- White (Not Hispanic or Latino)
- Black or African American (Not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
- Asian (Not Hispanic or Latino)
- American Indian or Alaska Native (Not Hispanic or Latino)
- Two or More Races (Not Hispanic or Latino)
- I do not wish to self-identify

Veteran Status

- Disabled Veteran
- Recently Separated Veteran
- Active Wartime or Campaign Badge Veteran
- Armed Forces Service Medal Veteran
- I am a protected veteran, but I choose not to self-identify the classifications to which I belong
- I am NOT a protected veteran

Gender

- Female
- Male
- I do not wish to self-identify

Disability Status

- I have a Disability
- I do NOT have a Disability
- I do not wish to self-identify

Reasonable Accommodation Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in alternate format, using a sign language interpreter, or using specialized equipment.

Signature

*[**Editor's note: According to 41 CFR 60-741.42, there are only two circumstances when an employer may ask a disabled applicant to self-identify on a pre-offer basis:*

(1) The invitation is made when the contractor actually is undertaking affirmative action for individuals with disabilities at the pre-offer stage; or (2) The invitation is made pursuant to a Federal, state or local law requiring affirmative action for individuals with disabilities.

(2) Federal contractors/subcontractors with 50 or more employees and federal contracts or subcontracts of \$50,000 or more are required to invite applicants to self-identify as a protected veteran prior to making a job offer, in addition to the post-offer self-identification that is already required. The pre-offer invitation to self-identify may be included in the contractors' application materials.

EEOC RACE/ETHNIC IDENTIFICATION CATEGORIES

Hispanic or Latino

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino)

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

Black or African American (Not Hispanic or Latino)

A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)

A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

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.

American Indian or Alaska 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 maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino)

All persons who identify with more than one of the above race/ethnicity categories.

VETERAN STATUS CATEGORIES

Disabled Veteran

Defined as (1) 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 (2) a person who was discharged or released from active duty because of a service-connected disability.

Recently Separated Veteran

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..

Active Wartime or Campaign Badge Veteran

Any 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.

Armed Forces Service Medal Veteran


Any 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.

DISABILITY STATUS

Individual with Disabilities

Defined as a person who (1) has a physical or mental impairment which substantially limits one or more of his or her major life activity(s), (2) has a record of such impairment(s), or (3) is regarded as having such impairment(s). For purposes of this definition, an individual with disability(s) is substantially limited if he or she is likely to experience difficulty in securing, retaining, or advancing in employment because of the disability(s).

Background History Check Release & Authorization Form

Print Legal Name: Last	First	Middle	Date of Birth (MM/DD/YY):	Social Security Number:
Other Name(s) Used (maiden name, previous married name(s), aliases, assumed names, etc.):				
Current Mailing Address:			Driver's License Number:	
			State Issued:	
Home Telephone Number:		Cell Phone Number:		
List your residences outside the current county in which you have lived in during the last seven years:				
City: _____	State: _____	County: _____		
City: _____	State: _____	County: _____		
City: _____	State: _____	County: _____		
<p>Successful completion of a records background check is a condition of your employment. In conducting background checks, <u>Regional Missouri Bank</u> may use information maintained by the State Police, DOC, Federal Bureau of Investigation, credit agencies, law enforcement agencies, DMV and other records resources.</p> <p><u>Regional Missouri Bank</u> may request to submit fingerprints for the purposes of conducting such a background check. You will not be permitted to be employed if you refuse to comply with a request to complete this form. You are entitled to review the credit, criminal and motor vehicle record history information. To obtain a copy of such information, you must contact the agency listed below.</p> <div style="text-align: center; margin: 10px 0;">  <p>ACCUDATA CREDIT SYSTEMS 1002 Diamond Ridge Jefferson City, Missouri 65109 1-800-475-6703</p> </div> <p>I understand that I am being given a copy of the <i>“Summary of Your Rights Under the Fair Credit Reporting Act”</i> prepared pursuant to 15 U.S.C. Section 1681-1681u. If I am applying for employment in the State of California or if I am a resident of California at the time of applying for employment, a summary of the provisions of California Civil Code section 1786.22 is also being provided to me with this form. If I am applying for employment in the State of New York or if I am a resident of New York at the time of applying for employment, in compliance with Section 380-c of the New York General Business law, I am being provided with a copy of NY Correction Law Article 23-a. This Disclosure and Authorization form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested in the future.</p> <p>I hereby certify that the facts set forth in the completed application are true and complete to the best of my knowledge. I understand falsified statements on this form may result in dismissal. I release and hold harmless any person, firm, or entity that discloses matters in accordance with this authorization, as well as from liability that might otherwise result from the request for use of and/or disclosure of any or all of the foregoing information. You are hereby authorized to make any investigation of my credit report, personal history, academic/professional credentials, military service records, criminal or driving MVR through any investigative or credit bureaus of your choice.* <i>The EEOC states for the purpose of pre-employment inquires, under the Age Discrimination in Employment act of 1967, section 1625.5, “A request on the part of an employer for information such as ‘DATE OF BIRTH” or “STATE AGE” on an employment application form is not, in itself, a violation of the act..”</i></p> <p>California, Oklahoma or Minnesota Applicants: I would like to receive a copy of any report obtained on me by _____.</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>				
Applicant's Signature:			Date:	

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

• **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

• **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identity theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

• **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

• **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

• **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

• **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

• **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

• **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

• **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

• **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

• **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, SE Washington, DC 20590</p>
<p>4. Creditors Subject to Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to Packers and Stockyards Act</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F St NE Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which the creditor operates <u>or</u> Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>