An EEO Employer/Vet/ Disabled

APPLICATION FOR EMPLOYMENT

An EEO Employer/Vet/ Disabled

Date: _____

Wilson & Muir Bank & Trust Co. receives applications and hires employees without regard to race, gender identity, sex, sexual orientation religion, age, national origin, marital status, disability, veteran status, or any other protected category. The receipt of this application does not mean that job openings exist and does not obligate us in any way. We appreciate your interest in Wilson & Muir Bank & Trust Co.

Denouve luneau				
PERSONAL INFORM				
Name	Social Security No			
Duna and Addison	Home or nearest phone			
Present Address No. Street City State Zip No. Street City State Zip				
How long have you lived at the above address?				
Previous Address	How long did you live there?			
Are you over age 18? Yes No If no, employment is subject to v	verification that you are of minimum legal age.			
Are you legally eligible to work in the U.S.? Yes No				
EMPLOYMENT INFORI	MATION			
Position applying for	Date available for work			
What salary or pay rate do you expect?				
Type of employment Full Time Part Time Temporary				
What days and hours are you available to work? Days	Hours			
Have you ever applied for a job with us before? Yes No Whe				
Have you ever been warned, disciplined, or discharged for violating company				
Have you ever been accused of stealing as an adult? Yes No	If so, explain.			
Do you use illegal drugs? Yes No				
Does your present employer know of your plans to change employment?	Yes No Why do you desire to make a change?			
Have you ever held a position of trust (handling money or confidential material	al)? Yes No			
Do you have steady transportation to work? Yes No				
Have you ever been discharged or asked to resign? Yes No				
Are there any other experiences, skills, or qualifications you have that specifically relate to working here?				
The there any other experiences, skills, or qualifications you have that specifi	ically relate to working here:			
Do you have any friends or relatives that currently work here? Yes	No. Name			
Are you aware of and understand the essential functions of the job for which				
Are you aware or and understand the essential functions of the job for which	you are applying? res No			

EDUCATION INFORMATION				
YEARS COMPLETED	DEGREE REC. AND MAJOR SUB.	NAME OF SCHOOL	LOCATION	DID YOU GRADUATE?
	_	YEARS DEGREE REC. AND	YEARS DEGREE REC. AND NAME OF SCHOOL	YEARS DEGREE REC. AND NAME OF SCHOOL LOCATION

Describe any other specialized or professional training (such as business, technical, or banking school). Include study courses given through public or private employment. State whether degree or certificate received.

PR	IOR WORK RECORD	(Start with most recent	or present em	ployer.)		
1) Name & Address of Most Recent Employer				Telephone No.		
Immediate Supervisor (Name & Pos	ition)	Date Hir	ed	Startin	ng Rate	
Your Job Title & Duties	-	Date Lef	ft	Last F	Rate	
Reason for leaving		I				
2) Name & Address of Employer				Telep	hone No.	
Immediate Supervisor (Name & Pos	ition)	Date Hir	ed	Startin	arting Rate	
Your Job Title & Duties		Date Lef	Date Left Last F		Rate	
Reason for leaving						
3) Name & Address of Employer				Telep	hone No.	
Immediate Supervisor (Name & Position)		Date Hir	Date Hired Starti		ng Rate	
Your Job Title & Duties		Date Lef	Date Left Last F		Rate	
Reason for leaving						
4) Name & Address of Employer				Telep	hone No.	
Immediate Supervisor (Name & Position) Date Hired		ed	Starting Rate			
Your Job Title & Duties		Date Lef	Date Left Last F		Rate	
Reason for leaving						
	REFERENCES (DO NO	OT LIST RELATIVES.)				
Name	Address		Phone		Relationship	
Name	Address Phone		Phone		Relationship	

REFERENCES (DO NOT LIST RELATIVES.)			
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship
Name	Address	Phone	Relationship

The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements or omission of information on this application, a resume, or other applicant information provided may be considered sufficient reason for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit bureau of your choice. In making this application for employment, I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. Such an inquiry includes information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigative consumer report.

I authorize the use of any information in this application to verify my statements, and I authorize the past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information. I understand that employment at Wilson & Muir Bank & Trust Co. is on an "at will" basis, and includes no guarantee, contract, or promise of employment for any specific length of time.

Signature of Applicant	Date

EQUAL EMPLOYMENT OPPORTUNITY (EEO) SELF-IDENTIFICATION FORM

Qualified applicants are considered for employment without regard to race, religion, sex, sexual orientation, gender identity, national origin, age, marital status, sexual orientation, veteran status, disability, or other protected characteristic.

The employer 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 employees to voluntarily self-identify their race or ethnicity. **Submission of this information is voluntary** and refusal to provide it will not subject you to **any** adverse treatment. The information obtained will be kept confidential and may 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.

First, MI):					
Street Address:					
City, State, Zip Code:					
Position Applied For: Date Applied:					
Gender Identification (check one)					
Female Male					
Race/Ethnic Identification (check one):					
Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spar culture or origin regardless of race.	ish				
If you did not check "Hispanic or Latino" above, please select one of the following race/ethnic identifications.					
White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Mid East, or North Africa. Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial group Africa.					
 Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of 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 A 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 or peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachm Two or More Races (Not Hispanic or Latino) - MI persons who identify with more than one of the above five races.	ent.				
Decline self-identification					
Applicant's Signature Date					

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PROTECTED VETERAN SELF-IDENTIFICATION FORM [41 C.F.R. § 60-300.42]

Wilson & Muir Bank is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance 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: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

- 1) A "disabled veteran" is one of the following:
 - a. A veteran of the U.S. military, ground, naval or air force 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 Veteran Affairs; or
 - b. A person who was discharged or released from active duty because of a service-connected disability.
- 2) 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.
- 3) 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.
- 4) 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 are a member of 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 to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA. Your decision to provide the relevant information is purely voluntary on your part, and refusal to provide such information will not subject you to any adverse treatment. The information will not be used in a manner inconsistent with VEVRAA, as amended.

The information will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) Government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs, or enforcing the Americans with Disabilities Act, may be informed.

I IDENTIFY AS ONE OR MORE OF T VETERAN STATUS LISTED ABO	THE CLASSIFICATIONS OF PROTECTED IVE.		
☐ I AM NOT A PROTECTED VETERAN			
☐ I CHOOSE NOT TO DISCLOSE.			
DATE	Signature		
	Print Name		