APPLICATION FOR EMPLOYMENT

PLEASE READ THE FOLLOWING BEFORE FILLING OUT THIS APPLICATION FORM.

This bank is an equal opportunity employer and does not discriminate in recruiting, hiring, training, promoting or other employment practices for reasons of race; color; religion; sex; national origin; age; Veteran/Reserve, National Guard status; marital status or disability. No question in this application is intended to secure information to be used for such discrimination.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. The bank at its own expense, arranges for a surety bond for each of its employees. Unless the applicant's background is acceptable to a surety company, it will be difficult to secure this bond and the bank may be unable to offer employment.

Please complete application and supporting documents in full. Attaching a résumé is optional. Replies to all questions will be held in strictest confidence. If your answers or statements require additional space, obtain supplemental sheets from the personnel receptionist. Please email completed application and supporting documents to turbevillej@ffbf.com.

Last Name	F	irst	Middle				
Social Security Num	ber Phone Number ()Ema) Email Address				
Present Street Addr	ess	City	State Zip				
Address a	nd Dates for Locations You have Lived the Last 5 Consecu	itive Years	From	То			
-							
	e to be employed in the United States? Yes O No O ge or older? Yes O No O	If needed, do you have work permits? Available Start Date: Full Time () Part Time ()	0 0	N/A ()			
How did you happen to apply here?	Employee Referral Walk-In Former Employee College Recruitment Other:	High School Recruitment) Employment Agency	Newspaper Ad 🔵 Customer 🔵				
Have you ever been dis	lave you ever been discharged or requested to resign from a position? Yes O No O						
If yes to above question	n, please explain:						
May we contact your p	resent or previous employer(s)? Yes 🔿 No 🔿						
Why do you desire to n	nake an employment change?						
Have you ever held a position of trust (handling money or confidential material)? Yes 🔿 No 🔿							

	GIVE PROFESSIONAL REFERENCES WHO WERE FORMER EMPLOYERS						
					Years		
	Supervisor Name	Phone Number	Super	visor's Title	Known		Company Name / City & State
F							
ONA							
SSI							
PROFESSIONAL							
₫.							
	GIVE PERSONAL REFERENCES WHO ARE	NOT RELATIVES OR FORMER EMPLOYERS					
			-		Years		
	Name	Phone Number	Oc	cupation	Known		Address
_							
ONA							
PERSONAL							
						Creada	
		me & Location ng (extension, night, business, etc.)		Graduate	Diploma	Grade AVG	Major/Minor Studies
	Grade School						
	High School						
NOL	College						
EDUCATION	Other Other						
EDU	Other						
	Check the appropriate space below to she	ow experience or training in the skills/equi	oment nan	ned. Also, name	and briefly des	cribe course	s taken that will fit you for the
		ast, present or other experiences, as you fe			,		,
	Bookkeeping O Adding Mac			stigation \bigcirc			
	Proof Machine Computer O Word PowerPoint		Outlook ⊂ VPM)			
	Word O PowerPoint		VPIVI				
	Other (list skills or abilities which you	consider relevant to this job)					
	Completion Is Optional For This Section.						
MILITARY	Have you ever served in the U.S. Armed S	ervices? Yes 🔿 No 🔿					
וורח	If so, what branch or branches?						
2			_				

	SHOW PRESENT AND PAST EMPLOYMENT FOR THE PAST FIVE YEARS INCLUDING PART-TIME EMPLOYMENT									
	Employ Da ^r			Sa	lary	. Type of	Title			
	From	То	Employment Information	Start	Finish	Business	Position	Job Responsibilities		
			Co. Name							
			Address							
			City/State/Zip							
_	Reason for leaving above position:									
	Employ Dat			Sa	lary	Type of	Title			
	From	То	Employment Information	Start	Finish	Business	Position	Job Responsibilities		
			Co. Name							
			Address							
			City/State/Zip							
	Reason fo	or leaving	above position:							
EMPLOYMENT HISTORY	Employ Da ^r			Sa	lary	. Type of	Title			
SIH	From	То	Employment Information	Start	Finish	Business	Position	Job Responsibilities		
IEN			Co. Name							
λγ			Address							
MPL			City/State/Zip							
	Reason for leaving above position:									
		nployment Dates		Salary		Turnet	T '11-			
-	From	То	Employment Information	Start	Finish	. Type of Business	Title Position	Job Responsibilities		
			Co. Name							
			Address							
			City/State/Zip							
-	Reason for leaving above position:									
-	Employ									
	Da ^r			Sa	lary	Type of	Title			
	From	То	Employment Information	Start	Finish	Business	Position	Job Responsibilities		
			Co. Name							
			Address							
			City/State/Zip							
Reason for leaving above position:										

THIS APPLICATION IS VOID AFTER 12 MONTHS, UNLESS RENEWED BY THE APPLIC	CANT.
	FI
WE ARE AN EQUAL OPPORTUNITY EMPLOYER Page	4

(A)	I hereby agree to being fingerprinted before or during my employment by a law enforcement agency and agree to my fingerprint record being processed by a FBI authorized agency.
	Initial Here
(B)	I authorize investigation of all information contained in this application. I understand the misrepresentation or omission of facts called for is cause for non- consideration for employment and/or dismissal if I am employed. Further, I understand and agree that my employment is of no definite period and may, regardless of the date of payment of my wages and salary, be terminated with or without cause or prior notice. Initial Here
(C)	I fully understand because of the nature of the business conducted by the bank, that all information, whether written, spoken or otherwise communicated or obtained, and all files and records of any and every description relating to the business of the bank or to anyone with whom the bank has dealings, constitute privileged matters and are to be treated in a strictly confidential manner. I fully understand and agree that, should I enter the employ of the bank, I am not to, and will not at any time, communicate or reveal any business of the bank or any such information or records or files or the matters contained therein to unauthorized personnel within the bank, or to anyone outside the bank. I understand any violation of the forgoing is sufficient grounds for termination of employment. Initial Here
(D)	In the event that I am employed by the bank, I will comply with all rules and regulations as set forth in the bank's policy manual or other communications distributed to all employees. Initial Here
(E)	I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing. Initial Here
(F)	I understand that the bank employs only U.S. citizens and properly authorized aliens. If I become employed, federal law requires that I furnish to the bank proof of my identity and employment authorization and to sign a statement under penalty of perjury verifying my eligibility for employment as a citizen or national of the United States or an otherwise employable alien. Initial Here
(G)	I hereby acknowledge that I have read the above statements and understand completely. Initial Here

Application Date

Applicant's Signature

(This is to advise you that your application for employment will be processed as quickly as possible. Public Law 91-508 requires that we advise you that a routine inquiry may be made during our initial or subsequent processing which will provide applicable information concerning your background. Upon written request, additional information as to the nature and scope of the inquiry, if one is made, will be provided.)



AUTHORIZATION AND WAIVER

This shall authorize the procurement of a consumer report by <u>First Federal Bank of Florida</u> as part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for <u>First Federal Bank of Florida</u> to procure consumer reports at any time during my employment period.

Date

Candidate Signature

Witness

INVESTIGATIVE REPORT DISCLOSURE

By this document, <u>First Federal Bank of Florida</u> discloses to you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics, and mode of living, may be obtained for employment purposes as part of the pre-employment background investigation and at any time during your employment. Should an investigative consumer report be requested, you will have the right to demand a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act. Please sign below to signify receipt of the foregoing disclosure.

Date

Candidate Signature

VOLUNTARY SELF-IDENTIFICATION FORM

Federal laws and regulations require us to report on our workforce by race, gender, and veteran status and to offer the opportunity for self-identification as to disabilities. Please assist us by completing this form. YOU ARE NOT REQUIRED TO PROVIDE THIS INFORMATION. Data which you provide shall be kept strictly confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled individuals and/or disabled veterans; (ii) first aid and safety personnel may be informed, to the extent appropriate, if the condition might require emergency treatment; and (iii) governmental officials reviewing the Company's compliance status shall be informed.

Last Name:	First Name:	MI:
Position(s) Applied Fe	or:	
Gender: Please place	a check next to the appropriate cate e	egory.
Race/Ethnicity: Pleas	e check one.	
□ Whit	te	□ Hispanic or Latino
□ Blac	k or African American	□ Asian
□ Nati	ve Hawaiian or Other Pacific Islander	American Indian or Alaska Native
□ Two	or More Races	
Veteran Status: Pleas	e check all that apply.	
□ Disabled Vete	eran	
	Wartime or Campaign Badge Veteran	
	s Service Medal Veteran	
\Box Recently Separate Separat	arated Veteran Discharge Date (MM/DD/	YY)
\Box Not a protected	ed veteran	
Disability: Please che	ck one.	
□ Yes,	I have a disability	disability
□ I do	not wish to answer	
SELF-IDENTIFICATIO	N FORM DEFINITIONS:	
compensation) un b.) a person who v An "individual with a disab	is entitled to compensation (or who but for the der laws administered by the Department of V was discharged or released from active duty be ility" means any person who (i) has a physical hore of such person's major life activities; (ii) l	cause of a service-connected disability. or mental impairment which

2. The term "*Active Duty Wartime or Campaign Badge Veteran*" applies to a veteran who served on active duty in the U.S. military, ground, naval, or air service during a period of war or in a campaign or expedition for which a campaign badge has been authorized, under laws administered by the Department of Defense.

3. The term "Armed Forces Service Medal Veteran" applies to any veteran who, while serving on active duty in the U.S. military, ground, naval, or air service, participated in a U.S. military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209).

4. The term "*Recently Separated Veteran*" applies to any veteran during the three-year period beginning on the date of discharge or release from active duty in the U.S. military, ground, naval, or air service.

Para información en español, visite <u>www.consumerfinance.gov/learnmore</u> o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

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 burcaus 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 FCRA. For more information, including information about additional rights, go to <u>www.consumerfinance.gov/learnmore</u> 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;
 - o you are the victim of identity theft and place a fraud alert in your file;
 - o your file contains inaccurate information as a result of fraud;
 - o you are on public assistance;
 - o 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 <u>www.consumerfinance.gov/learnmore</u> 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 <u>www.consumerfinance.gov/learnmore</u> 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 form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- 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 <u>www.consumerfinance.gov/learnmore</u>.

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:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552
b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
 To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks 	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
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.	 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480
c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations	c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
d. Federal Credit Unions	d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
 Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations 	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357