

Application for Employment

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, gender, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for the signature on the last page of this application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Position Applying For (REQUIRED)		Job Code	Expected Salary		Today's Date	
			Hourly <input type="checkbox"/> Annually <input type="checkbox"/>		/ /	
		\$				
Type of Employment Being Sought					Date Available to Begin Work	
Full-Time <input type="checkbox"/>		Part-Time <input type="checkbox"/>		Temporary <input type="checkbox"/>		/ /
Last Name			First Name		Middle Name	
Telephone Number			Alternate Telephone Number			
()			()			
Present Street Address				City	State	Zip
How did you hear about us?						
If you are hired, can you furnish proof that you are eligible to work in the U.S.?					Yes <input type="checkbox"/>	No <input type="checkbox"/>
May we contact your present employer?					Yes <input type="checkbox"/>	No <input type="checkbox"/>

Are you 18 years of age or older? (If you are hired, you may be required to submit proof of age.)				Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever applied here before?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, when?	/	/
Have you ever been employed here?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, when?	/	/
Do you have any relatives employed here?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, who?		
Have you ever been convicted of any law violation? (Include any plea of "guilty" or "no contest". Exclude minor traffic violations.)				Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details. (A conviction will not necessarily disqualify an applicant for employment.)					
If employed, would you expect to be engaged in any additional business or employment outside of your job here?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details.					

EDUCATION

GED (High School Equivalency) Facility Name		Test Date	City and State where Tested	
		/ /		
			Number of Years Completed	Diploma/Degree/Certificate
High School Name	Address			
College or University Name	Address			
Vocational or Technical Name	Address			
Subjects Studied				

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying?				
Are presently serving or have you served in the military?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Military Branch	Rank	Served From	Served To	
		/ /	/ /	
List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships that reveal race, color, religion, national origin, sex, age, disability or other protected status.)				
Please list special training or skills that would be of benefit in the job for which you are applying:				

ADDITIONAL INFORMATION

Have you ever used any other name(s)?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, list names:				
Have you ever been asked to resign from a job?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been fired from a job?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
If your response is yes to either question above, please provide details.				
Can you perform the essential functions of the job for which you are applying with or without reasonable accommodation?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
This is not intended to elicit information about any applicants' disability. Please do not provide information about the existence of a disability or whether an accommodation is necessary. These issues may be addressed at a later time to the extent permitted by law.				

REFERENCES

Please provide three professional references we may contact.

Name	Address	Phone
1.		()
2.		()
3.		()

AFFIDAVIT, CONSENT AND RELEASE

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug-screening examination. I hereby consent to a pre- and/or post- employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: ____ / ____ / ____

APPLICANT AFFIRMATIVE ACTION INFORMATION

It is the policy of this organization to provide equal employment opportunity to all qualified applicants for employment without regard to race, color, religion, national origin, gender, age, veteran status or disability. As an affirmative action employer under E.O. 11246 we invite all applicants to identify themselves as indicated below.

COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY EFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.

PLEASE PRINT

Name _____ Date _____

Position applied for (List only one) _____

Ethnicity:

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

Non-Hispanic or Latino

Racial Origin (You may mark one or more of the following):

Asian – 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- A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Black or African American – A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

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

Gender: Male Female

I elect not to identify.

Signature _____

FAIR CREDIT REPORTING ACT DISCLOSURE & AUTHORIZATION

DISCLOSURE

As an applicant for employment or a current employee of Centennial Bank Holdings, Inc. or any other subsidiary, you are a consumer with rights under the Fair Credit Reporting Act. When any of the following circumstances exist, Centennial Bank Holdings, Inc. may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you when: (1) considering your application for employment, (2) making a decision whether to offer you employment, (3) deciding whether to continue your employment (if you are hired), or (4) making other employment-related decisions directly affecting you.

For explanation purposes, a *consumer reporting agency* is a person or business which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer reports to others, such as Centennial Bank Holdings, Inc.

A *consumer report* means any written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for employment purposes.

An *investigative consumer report* means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates reported on or with others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigation requested as well as a written summary of your rights under the Fair Credit Reporting Act.

A U T H O R I Z A T I O N

PRINT FULL NAME	_____
SOCIAL SECURITY #	_____ *DATE OF BIRTH
CURRENT ADDRESS	_____
CITY/STATE/ZIP	_____
DRIVER'S LICENSE NO.	_____ STATE ISSUED
PROSPECTIVE EMPLOYER	
OTHER NAMES USED	_____

By signing here, I, _____, hereby voluntarily authorize Centennial Bank Holdings, Inc./Guaranty Bank & Trust Company to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my employment at Centennial Bank Holdings, Inc./Guaranty Bank & Trust Company. I understand that I have rights under the Fair Credit Reporting Act, including the rights discussed above.

*Date of Birth is being requested only for the purpose of identification in obtaining accurate retrieval of records, and will not be used for discriminatory purpose.

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 our major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **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, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit 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.ftc.gov/credit 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.ftc.gov/credit.
- **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 1-888-5-OPTOUT (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.ftc.gov/credit.

States may enforce 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. Federal Enforcers are:

Type of Business:	Contact:
Consumer reporting agencies, creditors, others not listed below	Federal Trade Commission: Consumer Response Center- FCRA, Washington, DC 20580. 1-877-382-4357
National Banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name.	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6, Washington, DC 20219. 1-800-613-6743
Federal Reserve System member banks (except national banks, and federal branches./agencies of foreign banks)	Federal Reserve Board, Division of Consumer & Community Affairs, Washington, DC 20551, 1-202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B" appear in the federal institution's name)	Office of Thrift Supervision, Consumer Complaints, Washington, DC 20552 1-800-842-6929
Federal Credit Unions (words "Federal Credit Union" appear in the institution's name	National Credit Union Administration, 1775 Duke Street, Alexandria, VA 22314 1-703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation, Consumer Response Center, 1345 Grand Ave, Suite 100, Kansas City, Mo 64108-2638
Air, surface, or rail common carriers regulated by Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management, Washington, DC 20590 1-202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture, Office of Deputy Administrator- GIPSA, Washington, DC 20250 1202-720-7051