



APPLICATION FOR EMPLOYMENT

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT but merely is intended to evaluate suitability for employment. It is the policy of the Company to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, and any other legally protected status under state and federal law. It is also the policy of the Company to conduct pre-employment screening (Credit History and Criminal Background Searches) if a job offer is made.

(PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE)

| | | | |
|--|------------|------------------------|----------|
| POSITION APPLIED FOR: | | DATE OF APPLICATION: | |
| LOCATION: <input type="checkbox"/> LARUE COUNTY <input type="checkbox"/> NELSON COUNTY <input type="checkbox"/> EITHER | | | |
| LAST NAME | FIRST NAME | MIDDLE NAME | |
| ADDRESS | CITY | STATE | ZIP CODE |
| Telephone Number(s) | | SOCIAL SECURITY NUMBER | |

EMPLOYMENT INFORMATION

| | | |
|---|--|---|
| BEST TIME TO CONTACT YOU: | Are you at least 18 years of age and legally eligible for work in the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| HAVE YOU EVER FILED AN APPLICATION WITH US BEFORE? <input type="checkbox"/> YES, IF YES DATE: _____ <input type="checkbox"/> NO | HAVE YOU EVER BEEN EMPLOYED WITH US BEFORE? <input type="checkbox"/> YES, IF YES DATE: _____ <input type="checkbox"/> NO | |
| DO ANY OF YOUR FRIENDS OR RELATIVES WORK HERE? <input type="checkbox"/> YES, IF YES NAME/RELATIONSHIP: _____ <input type="checkbox"/> NO | ARE YOU CURRENTLY EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO | MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? <small>PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT.</small> <input type="checkbox"/> YES <input type="checkbox"/> NO | ON WHAT DATE WOULD YOU BE AVAILABLE TO WORK? | DESIRED SALARY: |
| ARE YOU CURRENTLY ON "LAY-OFF" STATUS AND SUBJECT TO RECALL? <input type="checkbox"/> YES <input type="checkbox"/> NO | ARE YOU AVAILABLE TO WORK: <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> TEMPORARY | CAN YOU TRAVEL IF A JOB REQUIRES IT? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| HAVE YOU EVER BEEN INVOLUNTARILY TERMINATED FROM A JOB? <input type="checkbox"/> YES – PLEASE EXPLAIN: <input type="checkbox"/> NO | HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM A JOB? <input type="checkbox"/> YES – PLEASE EXPLAIN: <input type="checkbox"/> NO | |
| HAVE YOU RECEIVED A DESCRIPTION OF THE JOB OR BEEN MADE AWARE OF THE ESSENTIAL FUNCTIONS OF THE JOB YOU ARE APPLYING FOR? <input type="checkbox"/> YES <input type="checkbox"/> NO | DO YOU UNDERSTAND THE JOB REQUIREMENTS? <input type="checkbox"/> YES <input type="checkbox"/> NO | |

EDUCATION

| SCHOOL | NAME/ADDRESS OF SCHOOL | COURSE OF STUDY | NUMBER OF YEARS COMPLETED | DIPLOMA / DEGREE |
|--------------------------|------------------------|-----------------|---------------------------|------------------|
| HIGH SCHOOL | | | | |
| UNDERGRADUATE COLLEGE | | | | |
| GRADUATE SCHOOL | | | | |
| TRADE, BUSINESS OR OTHER | | | | |

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EMPLOYMENT HISTORY

Start with your present or last job, and list your last 4 employers.

| EMPLOYER | DATES EMPLOYED | | WORK PERFORMED |
|--|----------------------|-------|----------------|
| ADDRESS | FROM | TO | |
| TELEPHONE NUMBER(S) | HOURLY RATE / SALARY | | |
| JOB TITLE | STARTING | FINAL | |
| SUPERVISOR | REASON FOR LEAVING | | |
| MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| EMPLOYER | DATES EMPLOYED | | WORK PERFORMED |
|--|--------------------|-------|----------------|
| ADDRESS | FROM | TO | |
| TELEPHONE NUMBER(S) | HOURLY RATE/SALARY | | |
| JOB TITLE | STARTING | FINAL | |
| SUPERVISOR | REASON FOR LEAVING | | |
| MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| EMPLOYER | DATES EMPLOYED | | WORK PERFORMED |
|--|--------------------|-------|----------------|
| ADDRESS | FROM | TO | |
| TELEPHONE NUMBER(S) | HOURLY RATE/SALARY | | |
| JOB TITLE | STARTING | FINAL | |
| SUPERVISOR | REASON FOR LEAVING | | |
| MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

| EMPLOYER | DATES EMPLOYED | | WORK PERFORMED |
|--|--------------------|-------|----------------|
| ADDRESS | FROM | TO | |
| TELEPHONE NUMBER(S) | HOURLY RATE/SALARY | | |
| JOB TITLE | STARTING | FINAL | |
| SUPERVISOR | REASON FOR LEAVING | | |
| MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

COMMENTS

(IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE ON A SEPARATE SHEET OF PAPER.)

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JOB-RELATED SKILLS

DESCRIBE ANY SPECIALIZED TRAINING & SKILLS AND LIST PROFESSIONAL, TRADE, BUSINESS, OR CIVIC ACTIVITIES AND OFFICES HELD.

YOU MAY EXCLUDE MEMBERSHIPS WHICH WOULD REVEAL GENDER, RACE, RELIGION, NATIONAL ORIGIN, AGE, ANCESTRY, DISABILITY, OR OTHER PROTECTED STATUS:

ADDITIONAL INFORMATION/OTHER QUALIFICATIONS: *SUMMARIZE SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCE*

SPECIALIZED SKILLS (EQUIPMENT)

| | | |
|---|--|---|
| <input type="checkbox"/> TERMINAL | <input type="checkbox"/> SPREADSHEET | PRODUCTION/MOBILE MACHINERY/OTHER (LIST): |
| <input type="checkbox"/> PC / MAC | <input type="checkbox"/> WORD PROCESSING | |
| <input type="checkbox"/> TYPEWRITER- WPM: _____ | <input type="checkbox"/> CALCULATOR | |

REFERENCES *Do NOT INCLUDE FAMILY MEMBERS*

| | NAME | PHONE NUMBER | YEARS ACQUAINTED | RELATIONSHIP |
|---|------|--------------|------------------|--------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

APPLICANT'S STATEMENT

| | |
|--|---------------------------------|
| <p>I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.</p> <p>I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION.</p> <p>I HEREBY UNDERSTAND AND ACKNOWLEDGE THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP WITH THIS ORGANIZATION WOULD BE OF AN "AT WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE EMPLOYEE AT ANY TIME AND FOR ANY OR NO REASON. IT IS FURTHER UNDERSTOOD THAT THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THIS ORGANIZATION.</p> <p>IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE, MISLEADING, OR INACCURATE INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW(S) MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE EMPLOYER.</p> | |
| <p>_____</p> <p>SIGNATURE OF APPLICANT</p> | <p>_____</p> <p>DATE</p> |

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VOLUNTARY APPLICANT SURVEY

APPLICANTS ARE CONSIDERED FOR EMPLOYMENT WITHOUT REGARD TO RACE, COLOR, AGE, RELIGION, SEX, NATIONAL ORIGIN, MARITAL STATUS, VETERAN'S STATUS, CITIZENSHIP STATUS, DISABILITY, GENETIC INFORMATION OR ANY OTHER CATEGORY PROTECTED BY FEDERAL, STATE, OR LOCAL STATUTE. AS A GOVERNMENT CONTRACTOR, WE ARE COMMITTED TO COMPLIANCE WITH APPLICABLE GOVERNMENT REGULATIONS AND AFFIRMATIVE ACTION RESPONSIBILITIES. SOLELY TO HELP US COMPLY WITH GOVERNMENT RECORD KEEPING, REPORTING AND OTHER REQUIREMENTS, WE ASK THAT YOU ASSIST US BY COMPLETING THIS VOLUNTARY APPLICANT SURVEY. WE APPRECIATE YOUR COOPERATION. THIS DATA IS FOR PERIODIC GOVERNMENT REPORTING AND WILL BE KEPT IN A CONFIDENTIAL FILE.

| | |
|-----------------------|--|
| NAME: | |
| DATE: | |
| POSITION APPLIED FOR: | |
| REFERRAL SOURCE: | <input type="checkbox"/> ADVERTISEMENT <input type="checkbox"/> EMPLOYMENT AGENCY <input type="checkbox"/> EMPLOYEE <input type="checkbox"/> FRIEND <input type="checkbox"/> OTHER |

SUBMISSION OF THIS INFORMATION IS VOLUNTARY.

| CHECK ONE: | CHECK ONE OF THE FOLLOWING: | CHECK, IF APPLICABLE: |
|--|--|---|
| <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | <input type="checkbox"/> WHITE <input type="checkbox"/> BLACK OR AFRICAN AMERICAN <input type="checkbox"/> HISPANIC OR LATINO <input type="checkbox"/> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER <input type="checkbox"/> ASIAN <input type="checkbox"/> AMERICAN INDIAN/ALASKAN NATIVE <input type="checkbox"/> TWO OR MORE RACES <input type="checkbox"/> OTHER | <input type="checkbox"/> ARMED FORCES SERVICE MEDAL VETERAN <input type="checkbox"/> RECENTLY SEPARATED VETERAN <input type="checkbox"/> DISABLED VETERAN <input type="checkbox"/> ACTIVE DUTY WARTIME OR CAMPAIGN BADGE VETERAN <input type="checkbox"/> OTHER PROTECTED VETERAN |

Thank You.

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INVITATION TO SELF IDENTIFY

This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act 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:

- A “disabled veteran” is one of the following:
 - 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
 - a person who was discharged or released from active duty because of a service-connected disability.
- 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.
- 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.
- 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](#).

Protected veterans may have additional rights under USERRA—the Uniformed Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service.

If you believe you belong to 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 in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

- I IDENTIFY AS ONE OR MORE OF THE CLASSIFICATIONS OF PROTECTED VETERAN LISTED ABOVE
- I AM NOT A PROTECTED VETERAN
- I PREFER NOT TO SELF IDENTIFY

Date _____ Name _____