



Employment Application

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

Please print this form, complete and return in one of the following ways:

- 1) Fax to 781-644-6444
- 2) Email to: christopher.oser@polimortgage.com
- 3) Send to the address below:

**Poli Mortgage Group
685 Canton Street, Suite 200
Norwood, MA 02062
Attn: Human Resources**

Name:			Date:		
Last	First	Middle Initial			
Present Address:					
Number	Street	City	State	Zip Code	
Social Security Number: _____ - _____ - _____					
Home Phone ()			Cell Phone: ()		
Email Address:			Date available to start?		
Position Applying for:			Salary Desired: \$		
Employment Desired: <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY Number of Hours Week:					
Please make us aware of any scheduled time off you have in the next 5 months:					
Loan Originators NMLS Number:			State(s) Licensed In:		

Education:

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete Address)	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Graduate or Trade School				

Military Experience:

Have you ever been in the Armed Forces?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you now a Member of the National Guard / Reserve?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Specialty: _____	Date Entered: _____ Discharge Date: _____

Application For Employment (continued)

Work Experience:

Please attach a copy of your Resume

In addition to the information provided on your resume, please provide the additional information about your previous Employers as requested below. **Attach additional sheets if necessary.**

Name of Present Employer: _____	Employment Dates: From: _____ To: _____
Street Address: _____	Supervisors Name: _____
City: _____ State: _____ Zip Code: _____	Phone Number : (____) _____
E-Mail Address: _____	Salary: Start: _____ Final: _____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving (be specific): _____

Name of Previous Employer: _____	Employment Dates: From: _____ To: _____
Street Address: _____	Supervisors Name: _____
City: _____ State: _____ Zip Code: _____	Phone Number : (____) _____
E-Mail Address: _____	Salary: Start: _____ Final: _____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving (be specific): _____

Name of Previous Employer: _____	Employment Dates: From: _____ To: _____
Street Address: _____	Supervisors Name: _____
City: _____ State: _____ Zip Code: _____	Phone Number : (____) _____
E-Mail Address: _____	Salary: Start: _____ Final: _____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving (be specific): _____

Name of Previous Employer: _____	Employment Dates: From: _____ To: _____
Street Address: _____	Supervisors Name: _____
City: _____ State: _____ Zip Code: _____	Phone Number : (____) _____
E-Mail Address: _____	Salary: Start: _____ Final: _____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving (be specific): _____

Application For Employment

Verifiable Volunteer Experience:

Please list your verifiable volunteer experience for the **past five years** beginning with your most recent position held.

Attach additional sheets if necessary.

Professional References:

Please List Four (4) References - Two (2) Former Managers and Two (2) Co-Workers:

Name: _____ Name: _____

Position: _____ Position: _____

Company: _____ Company: _____

Phone: (W) () _____ (Cell) _____ Phone: (W) () _____ (Cell) _____

Email Address: _____ Email Address: _____

Relationship: _____ Relationship: _____

Name: _____ Name: _____

Position: _____ Position: _____

Company: _____ Company: _____

Phone: (W) () _____ (Cell) _____ Phone: (W) () _____ (Cell) _____

Email Address: _____ Email Address: _____

Relationship: _____ Relationship: _____

Please list below any other information that may be relevant to your Employment Application:

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Poli Mortgage Group, (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Poli Mortgage Group, Inc. or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and Poli Mortgage Group, Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be an introductory period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of Applicant: _____ **Date:** _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability or any other basis prohibited by state or federal law. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

"It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability."

Thank you for completing this application form and for your interest in Poli Mortgage Group.

Please include a copy of your Drivers License for verification purposes only.



Employment Authorization and Consent for Release of Information

Fair Credit Reporting Act Disclosure Statement and Authorization

DISCLOSURE STATEMENT:

A consumer report may be obtained on you for employment purposes. It may be an “investigative consumer report” that includes information as to your character, general reputation, personal characteristics, and mode of living. For investigative consumer reports, you have a right to request disclosure of the nature and scope of the report, which involves personal interviews with sources such as your neighbors, friends, or associates.

AUTHORIZATION:

Poli Mortgage Group, Inc. requires, as a condition of employment, and/or continued employment, that all applicants consent to and authorize a verification of the information submitted on their application or resume. Please read this statement carefully.

I, the undersigned applicant, do hereby certify that the information provided by me for the purpose of employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal.

This release and authorization acknowledges that **Poli Mortgage Group, Inc.** may now, or at any time while I am employed, conduct a verification of my education, employment history, credit history, and motor vehicle records. In addition this company may contact personal references and receive any criminal history record information pertaining to me which may be in the files of any Federal, State or Local criminal justice agency in any state, and/or other information as deemed necessary to fulfill the job requirements.

I have read and understand this release and consent, and I authorize the background verification. I authorize persons, schools, current and former employers, and other organizations and agencies to provide Employment Screening Services with all information that may be requested, and I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

Please provide all requested information and provide addresses for the last seven (7) years.

Applicant’s Name, Printed – Last, First, Middle	Maiden or Other Name(s) used	
Current Address – Street, City, State, Zip Code	How Long	
Previous Address – Street, City, State, Zip Code	How Long	
Previous Address – Street, City, State, Zip Code	How Long	
Social Security Number	Date of Birth –(for confirmation of ID only)*	
Name – exactly as it appears on Driver’s License	Driver’s License Number	State
[] Yes [] No		
Authorization to contact present employer for reference	Signature	Date

*Date of birth is being requested for identification purposes only in obtaining accurate retrieval of records and will not be used for discriminatory purposes.