



NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION, PLEASE PRINT OR TYPE

PERSONAL INFORMATION

Name – First _____ Middle _____ Last _____

Have you ever worked under another name? Yes No If yes, what was it and what was the reason for the change? _____

Social Security Number: _____ Phone No: _____

Present Address _____ City _____ State _____ Zip _____ How long? _____

Position applying for: _____ What is your desired salary range? _____

What date are you available for employment? _____ Are You 18 Years or older? Yes No Do You have a legal right to work in the U.S.? Yes No

Have you ever applied for a position at NAIFA? Yes No When? _____

Is there anything that would prevent you from performing the essential functions of the job in a reasonable and safe manner? Yes No

If yes, please explain _____

Are any of your relatives presently employed with NAIFA or its Conferences and/or Affiliates? Yes No If yes, name of relative: _____

Have you ever been convicted of a crime? Yes No If yes, state nature of offense, when, where and disposition _____

PLEASE NOTE: A criminal conviction is not an absolute bar to employment but will be considered in relation to specific job requirements.

Do you have any commitment or agreement with another employer that might affect your employment with NAIFA? Yes No

If yes, please explain _____

Have you ever been terminated from a job or asked to resign as an alternative to being fired? Yes No

If yes, please explain _____

Do you have a high school diploma or GED certificate? Yes No

EDUCATION

NAME AND LOCATION OF SCHOOL, COLLEGE OR UNIVERSITY	COURSE OF STUDY (LIST MAJOR)	CREDITS EARNED & AVERAGE GRADE	GRADUATED? YES/NO	DEGREE/ CERTIFICATE RECEIVED (AA,BA,BS,MA,PHD)

LICENSE/REGISTRATION/CERTIFICATE LIST ANY REQUIRED PROFESSIONAL LICENSE, REGISTRATION, CERTIFICATION, ETC.			
DESCRIPTION	STATE	NUMBER	EXPIRATION

National Association of Insurance and Financial Advisors (NAIFA) will not discriminate against any employee or applicant for employment because of race, creed, color, national origin, sex, age, religion, physical disabilities, marital status, or any other matters protected by applicable federal, state and local laws in the jurisdictions where it maintains facilities. Answers to application questions will be utilized for applicable, job information only. NAIFA complies with the law regarding "reasonable accommodations" to qualified individuals with disabilities in accordance with The Americans with Disabilities Act and applicable state and local laws. Applicant requiring reasonable accommodations in order to participate in the interview process are requested to contact the Human Resources Department in order to arrange such accommodations.

An Equal Opportunity Employer

EMPLOYMENT HISTORY - PLEASE NOTE: A RESUME WILL NOT SUBSTITUTE

INSTRUCTIONS: PLEASE PRINT AND LIST EVERY POSITION THAT YOU HAVE HELD STARTING WITH YOUR MOST RECENT POSITION. (ACCOUNT FOR ALL PERIODS OF UNEMPLOYMENT.) IF YOU REQUIRE ADDITIONAL SPACE TO DETAIL YOUR EMPLOYMENT HISTORY, PLEASE ATTACH ADDITIONAL INFORMATION.

Employment Background: Present or most recent position. May we contact your present employer for a reference? Yes No

Employer: _____ Phone _____

Address _____ City _____ State _____ Zip _____

Employed From (Mo/Yr): _____ To _____ Starting Base Pay: _____ Finish _____

Your Position Title _____

Supervisor's Name/Title: _____

Reason for leaving: _____

Previous Positions:

Employer: _____ Phone _____

Address _____ City _____ State _____ Zip _____

Employed From (Mo/Yr): _____ To _____ Starting Base Pay: _____ Finish _____

Your Position Title _____

Supervisor's Name/Title: _____

Reason for leaving: _____

May we contact this employer? Yes No

Employer: _____ Phone _____

Address _____ City _____ State _____ Zip _____

Employed From (Mo/Yr): _____ To _____ Starting Base Pay: _____ Finish _____

Your Position Title _____

Supervisor's Name/Title: _____

Reason for leaving: _____

May we contact this employer? Yes No

Periods of Unemployment: _____

Explanation: _____

UNITED STATES MILITARY SERVICE

INSTRUCTIONS: IF YOU OBTAINED ANY EXPERIENCE OR SKILLS WHILE IN MILITARY SERVICE THAT RELATE TO THE JOB FOR WHICH YOU ARE APPLYING, PLEASE DESCRIBE THE NATURE OF YOUR DUTIES THAT LED TO THE EXPERIENCE.

COMMENTS AND ACCOMPLISHMENTS

INSTRUCTIONS: EXPLAIN BELOW OR ON ANOTHER SHEET, YOUR PRIMARY AREA OF SPECIALIZATION. NOTE ANY OTHER DETAILS WHICH SHOULD BE CONSIDERED IN REVIEWING YOUR QUALIFICATIONS INCLUDING PROFESSIONAL AFFILIATIONS, HONORS AND AWARDS, THESES, PUBLICATIONS, PATENTS, ETC. (YOU MAY EXCLUDE PROFESSIONAL AFFILIATIONS WHICH MAY SUGGEST THE RACE, RELIGIOUS CREED, SEX, MARITAL STATUS, AGE, COLOR, NATIONAL ORIGIN, OR PHYSICAL HANDICAP OF ITS MEMBERS.)

