APPLICANT CONTROL FORM

We consider applicants for all positions without regard to race, creed, color, religion, gender, national origin, age, disability, marital status, sexual orientation, genetic information, status with regard to public assistance, military service or any other basis protected by law.

Date:_____

Name:_____ _____ _____
(Last) (First) (M.I.)

Address:_____
(Street) (City) (State) (Zip)

The following voluntary information is used to monitor American Federal Bank's Affirmative Action Program. The information you are being asked to provide is the result of a federal requirement under Executive Order 11246 and a state requirement under the Minnesota Human Rights Act. It will be used for reporting applicant statistics and determining effective methods of advertising. **The information is voluntary. It is not part of your official application for employment.**
It is considered confidential information and will not be used in any hiring decision.

Position Title:_____ Bank Location:_____

Gender: ☐ Male ☐ Female

Disabled: ☐ Yes ☐ No

Race:
☐ White ☐ African American
☐ Hispanic ☐ Native American / Alaskan Native
☐ Other ☐ Asian / Pacific Islander

Vietnam Veteran ☐ Yes ☐ No

Disabled Veteran ☐ Yes ☐ No

Other Veteran ☐ Yes ☐ No

How did you learn of this opportunity?

☐ Newspaper
☐ Job Service
☐ American Federal Employee
☐ American Federal Web Site
☐ Relative
☐ Walk-In
☐ Word of Mouth
☐ Other: _____

Fill out & save this form
Email to: mseim@americanfederal.net

■ **To Be Completed by Applicant** ■ **Not for Interview Purposes** ■ **To be Filed Separately from Application**

AA/EEO Employer 01/2012