

**Allied Home Mortgage Capital Corporation  
APPLICATION FOR EMPLOYMENT (for Branch Managers only)**

*We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.*

(PLEASE PRINT)

How Did You Learn About Us? • Advertisement      • Friend              • Inquiry • Employment Agency    • Relative            • Other _____	Date of Application
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Last Name	First Name	Middle Name
Address	Street	City
		State
		Zip Code
Telephone Number(s)	Social Security (voluntary)	

Best time to contact you at home is: \_\_\_\_\_:\_\_\_\_\_ AM/PM

Have you ever filed an application with us before:                      • Yes                      • No  
 If yes, give date: \_\_\_\_\_

Have you ever been employed with us before?                      • Yes                      • No  
 If yes, give date: \_\_\_\_\_

Do any of your friends or relatives, other than spouse, work here?                      • Yes                      • No  
 If yes, state name, relationship and location: \_\_\_\_\_

Are you currently employed?                      • Yes                      • No

May we contact your present employer?                      • Yes                      • No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? • Yes                      • No  
*Proof of citizenship or immigration status will be required upon employment.*

Date available for work    \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Are you currently on "lay-off" status and subject to recall?                      • Yes                      • No

EDUCATION			
School	Name and Address of School	Course of Study	Diploma/Degree
High School			
Undergraduate College			
Graduate/Professional			
Other (Specify)			

Describe any specialized training, apprenticeship, skills and extra-curricular activities:

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Describe any job-related training received in the United States military:

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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.*

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<b>Additional Information: Other Qualifications</b> <i>Summarize special job-related skills and qualifications acquired from employment or other experience.</i>
<b>Specialized Skills (Skills//Machinery/Equipment/Computer Hardware, Network, or Software)</b>

<b>WORK EXPERIENCE</b>		
<b>Start with your present or last job. Include any job-related military service assignments and volunteer activities.</b>		
<b>Employer</b>	<b>Dates Employed</b>	<b>Work Performed</b>
<b>Address</b>	<b>From: _____ To: _____</b> <b>Hourly Rate/Salary:</b> <b>Starting: _____ Final: _____</b> <b>Status: • W2 • 1099</b>	
<b>Telephone Number(s)</b>		
<b>Starting/Present Job Title</b>		
<b>Supervisor</b>		
<b>Reason for Leaving</b>	<b>May We Contact:</b> <b>• Yes • No</b>	
<b>Employer</b>	<b>Dates Employed</b>	<b>Work Performed</b>
<b>Address</b>	<b>From: _____ To: _____</b> <b>Hourly Rate/Salary:</b> <b>Starting: _____ Final: _____</b> <b>Status: • W2 • 1099</b>	
<b>Telephone Number(s)</b>		
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<b>Supervisor</b>		
<b>Reason for Leaving</b>	<b>May We Contact:</b> <b>• Yes • No</b>	

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	From: _____ To: _____	
Address	Hourly Rate/Salary: Starting: _____ Final: _____ Status: • W2 • 1099	
Telephone Number(s)		
Starting/Present Job title		
Supervisor		
Reason for Leaving	May We Contact: • Yes • No	
<b>Comments: Include explanation of any gaps in employment.</b>		

PROFESSIONAL REFERENCES (must be individuals you were affiliated with in the mortgage industry) <i>Do not include family members. You must have four references; at least two must be present or previous co-workers.</i>				
Name	Company	Title	Phone Number	Business Relationship to Applicant
1.				
2.				
3.				
4.				
WHOLESALE LENDER REFERENCES (list only those individuals with whom you've recently conducted business) <i>Do not include family members. You must have four references.</i>				
Name	Company	Title	Phone Number	Business Relationship to Applicant
1.				
2.				
3.				
4.				

**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

**Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.**

- Yes
- No

**APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. 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.

In the event of employment, I understand that false or misleading 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.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date