



Structured Compensation Job Description

**TELLER I**

Department: Branch Operations  
Reports to: Teller Supervisor and Branch Manager  
Supervises: Direct: n/a

Level: 1  
Classification: Non-Exempt  
Classification: Part –Time  
Revised Date: 03/27/2017

Role:

The primary role of this position is to be the face of the institution and provide members with specialized services, products, and business practices so that we can enhance their financial future. To accomplish this, this position must convey a high-quality of customer service while identifying the member's need and recommending the most suitable solution for the member. The position must perform transactional duties to serve members by receiving or paying out funds with high accuracy in accordance with credit union policies and procedures.

Functions and Responsibilities:

- Greets members professionally and promptly
- Provide comprehensive, accurate, and efficient member transactions in a timely manner
- Builds and maintains full knowledge of all products and services
- Completes account transactions including but not limited to: deposits, withdrawals, loan payments, account transfers, wire transfers, travelers checks and money order sales
- Effectively executes daily branch balancing procedures
- Identify the financial needs of a member and cross-sell products and services and/or refer the member to the appropriate department if necessary.
- Completes all mandatory compliance requirements and executes processes and reports required by the Bank Secrecy Act and any credit union policies and procedures
- Maintains privacy of member personal and account information
- Practice, promote, and support the mission and vision of the credit union and ensure that they are carried out by each employee.
- Maintains a work area that is clean, well maintained, and secure
- Guarantees that member's problems and/or questions are courteously and promptly answered
- Other duties as assigned

Knowledge, Skills, and Abilities:

<i>Education</i>	A high school diploma or GED
<i>Experience</i>	Previous cash handling and/or teller experience preferred
<i>Skills/Abilities</i>	Must have strong verbal and interpersonal skills and also the ability to effectively communicate with members, management, and staff.
	Good customer service skills
	Must have a professional appearance, dress, and attitude
	Good math and time management skills

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*Skills/Abilities (Continued)* Able to operate a 10-key calculator and computer keyboard

Strong working knowledge of relevant software including Microsoft Office, Word and Excel

*Physical Requirements*

While performing the essential duties of the position, the employee would be regularly required to stand, sit, walk, stoop, kneel, talk, and hear. Vision requirements include close vision and the ability to focus. The nature of this position requires physical mobility and the ability to occasionally lift and/or move a maximum of 30 pounds

*Working Conditions*

Work is performed indoors with some potential for exposure to safety and health hazards related to electronics work. May require periodic travel between branches. There is exposure to potential hazardous conditions such as robbery. Employees are to receive detailed instructions and procedures to follow in order to minimize risk.

In accordance with the American with Disabilities Act, it is possible that requirements may be modified to reasonably accommodate disabled individuals. However, no accommodations will be made which may pose serious health or safety risks to the employee or others or which impose undue hardships on the organization.

This job description is not a complete statement of all duties and responsibilities comprising this position. Job descriptions are not intended and do not create employment contracts. The organization maintains its status as an at-will employer. Employees can be terminated for any reason not prohibited by law.

# Application for Employment

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Name \_\_\_\_\_ Applicant ID # \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State ZIP Code

Telephone # ( ) Cellular/Other Phone # ( ) E-mail Address \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_/\_\_\_\_/\_\_\_\_

**Referral Source** (Please check the appropriate category and list the source.)

- |  |  |
|--|--|
| <input type="checkbox"/> Walk-In _____           | <input type="checkbox"/> School _____                          |
| <input type="checkbox"/> Employee _____          | <input type="checkbox"/> Job Fair _____                        |
| <input type="checkbox"/> Advertisement _____     | <input type="checkbox"/> Staffing Agency _____                 |
| <input type="checkbox"/> Company's Website _____ | <input type="checkbox"/> Government<br>Employment Agency _____ |
| <input type="checkbox"/> Other Internet _____    | <input type="checkbox"/> Other _____                           |

If necessary, best time to call you is \_\_\_\_\_ : \_\_\_\_\_ AM  
PM  
☐ Home ☐ Cellular/Other

May we contact you at work? \_\_\_\_\_ ☐ Yes ☐ No

If yes, work number and best time to call:

( ) : \_\_\_\_\_ AM  
PM

If you are under 18 and it is required,  
can you furnish a work permit? \_\_\_\_\_ ☐ Yes ☐ No

If no, please explain: \_\_\_\_\_

Have you submitted an application here before? ..... ☐ Yes ☐ No

If yes, give date(s) and position(s): \_\_\_\_\_

Have you ever been employed here before? ..... ☐ Yes ☐ No

If yes, give dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_

Is this application a request for reemployment  
following an extended military leave of absence  
from this company? ..... ☐ Yes ☐ No

Are you legally eligible for employment  
in this country? ..... ☐ Yes ☐ No

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

What is your desired salary range or hourly rate of pay?

\$ \_\_\_\_\_ Per \_\_\_\_\_

Type of employment desired: ☐ Full-Time ☐ Part-Time  
☐ Educational Co-Op ☐ Seasonal ☐ Temporary

Will you relocate if job requires it? ..... ☐ Yes ☐ No

Will you travel if job requires it? ..... ☐ Yes ☐ No

If they have been explained to you, are you able to meet the  
attendance requirements of the position? ... ☐ N/A ☐ Yes ☐ No

Will you work overtime if required? ..... ☐ Yes ☐ No

If no, please explain: \_\_\_\_\_

Are you able to perform the "essential functions" of the job  
for which you are applying (with or without reasonable  
accommodation)?

**This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.**

☐ Yes ☐ No ☐ Need more information about the  
job's "essential functions" to respond

Driver's license number required if driving may be required in the  
job for which you are applying:

\_\_\_\_\_ State \_\_\_\_\_

Have you ever been bonded? ..... ☐ Yes ☐ No

**Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.**

Have you ever pleaded "guilty" or "no contest" to  
or been convicted of a crime? ..... ☐ Yes ☐ No

If yes, please provide date(s) and details: \_\_\_\_\_

Have you entered into an agreement with any former employer or  
other party (such as a noncompetition agreement) that might, in any  
way, restrict your ability to work for our company? ..... ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_



## Employment History

Starting with your most recent employer, provide the following information.

Employer	Telephone # (      )	Dates employed: Month / Year to Month / Year
Street address	City State	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary    \$      per
Starting job title/final job title		Commission/Bonus/Other Compensation \$
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary    \$      per
Why did you leave?	E-mail:	Commission/Bonus/Other Compensation \$
Summarize the type of work performed and job responsibilities.		
What did you like most about your position?		
What were the things you liked least about the position?		

Employer	Telephone # (      )	Dates employed: Month / Year to Month / Year
Street address	City State	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary    \$      per
Starting job title/final job title		Commission/Bonus/Other Compensation \$
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary    \$      per
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Starting job title/final job title		Commission/Bonus/Other Compensation \$
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary    \$      per
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Why did you leave?	E-mail:	Commission/Bonus/Other Compensation \$
Summarize the type of work performed and job responsibilities.		
What did you like most about your position?		
What were the things you liked least about the position?		



## Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability. \_\_\_\_\_

If not addressed on previous page, have you ever been fired or asked to resign from a job?..... ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

## Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

**Computer Skills** (Check appropriate boxes. Include software titles and years of experience.)

<input type="checkbox"/> Word Processing _____ Years: _____	<input type="checkbox"/> Internet _____ Years: _____
<input type="checkbox"/> Spreadsheet _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____
<input type="checkbox"/> Presentation _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____
<input type="checkbox"/> E-mail _____ Years: _____	<input type="checkbox"/> Other _____ Years: _____

## Educational Background

Starting with your most recent school attended, provide the following information.

School (include City and State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

## References

List names and telephone numbers of three business/work references who are **not** related to you and are **not** previous supervisors.  
If not applicable, list three school or personal references who are **not** related to you.

Name	Title	Relationship to You	Telephone	E-mail	# of Years Known
			( )		
			( )		
			( )		

## Social Security Number

SS# - -

We will use this information only for employment purposes and make reasonable efforts to safeguard your privacy.



## Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

**Exclude memberships that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status.**

Organization	Offices Held

List special accomplishments, publications, awards, etc.

**Exclude information that would reveal race, color, religion, sex, national origin, genetic information, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status.**

In your current or a previous job, have you ever written instructions or directions to be followed by employees or customers?

☐ Yes ☐ No ☐ Not Applicable

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Is there any other job-related information you want us to know about you? \_\_\_\_\_  
\_\_\_\_\_

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

**This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, genetic information, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, genetic information, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.**

**I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.**

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



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