

Autumnwood Financial Corporation

INDIVIDUAL RESUME and REFERENCE INFORMATION

To: Mr. Thomas J. Connelly
Autumnwood Financial Corporation
100 N. Main Street, P.O. Box 947
Walworth, Wisconsin 53184
262-275-6808

Date: _____

PERSONAL

Individual	
Name:	Date of Birth: / /
Home Phone Number: ()	Social Security Number:
Business Phone Number: ()	Drivers License Number:

EDUCATIONAL BACKGROUND

Grammar School		
Name of School:		
Street Address:		
City:	State:	Zip:
Dates Attended From:	To:	

High School		
Name of School:		
Street Address:		
City:	State:	Zip:
Dates Attended From:	To:	
Did you graduate?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

College	
Name of College:	
Majored in?	Degree: Yes <input type="checkbox"/> No <input type="checkbox"/>
Degree in?	Year of Graduation:

Additional Education

EMPLOYMENT EXPERIENCE

1. Current Employer

Name:			
Street Address:			
P.O. Box:		Apt. Number:	
City:		State:	Zip:
Phone Number: ()		Job Title:	
Employed From:		To:	
Supervisor's Name:			
Description and Duties and Accomplishments:			

2. Previous Employer			
Name:			
Street Address:			
P.O. Box:		Apt. Number:	
City:		State:	Zip:
Phone Number: ()		Job Title:	
Employed From:		To:	
Supervisor's Name:			
Description and Duties and Accomplishments:			

3. Previous Employer			
Name:			
Street Address:			
P.O. Box:		Apt. Number:	
City:		State:	Zip:
Phone Number: ()		Job Title:	
Employed From:		To:	
Supervisor's Name:			
Description and Duties and Accomplishments:			

1. Current Address			
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Street Address:				
City:		State:		Zip:
From:	To:		Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Landlord's Name:		Phone Number: ()		

2. Former Address				
Street Address:				
City:		State:		Zip:
From:	To:		Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Landlord's Name:		Phone Number: ()		

3. Former Address				
Street Address:				
City:		State:		Zip:
From:	To:		Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Landlord's Name:		Phone Number: ()		

REFERENCES

Accountant				
Name:		Title:		
Firm Name:				
Street Address:				
City:		State:		Zip:
Phone Number: ()		How long has this person known you?		

Banker				
Name:		Title:		
Firm Name:				
Street Address:				
City:		State:		Zip:
Phone Number: ()		How long has this person known you?		

Lawyer				
Name:		Title:		
Firm Name:				
Street Address:				
City:		State:		Zip:
Phone Number: ()		How long has this person known you?		

Clergyman				
Name:		Title:		
Firm Name:				
Street Address:				
City:		State:		Zip:
Phone Number: ()		How long has this person known you?		

1. Business Reference		
Name:	Title:	
Firm Name:		
Street Address:		
City:	State:	Zip:
Phone Number: ()	How long has this person known you?	
What is the nature of the relationship?		

2. Business Reference		
Name:	Title:	
Firm Name:		
Street Address:		
City:	State:	Zip:
Phone Number: ()	How long has this person known you?	
What is the nature of the relationship?		

1. Personal References:		
Name:	Title:	
Firm Name:		
Street Address:		
City:	State:	Zip:
Phone Number: ()	How long has this person known you?	
What is the nature of the relationship?		

2. Personal References:		
Name:	Title:	
Firm Name:		
Street Address:		
City:	State:	Zip:
Phone Number: ()	How long has this person known you?	
What is the nature of the relationship?		

PROFESSIONAL AFFILIATIONS:
Clubs or organizations of which you are a member

1.	4.
2.	5.
3.	6.

FAMILY INFORMATION

Married? Yes No Spouse's Name: _____

Children's Names and Ages:	Age:	
	Age:	
	Age:	
	Age:	