

PERSONAL INFORMATION

Today's Date / /	Social Security # - -	Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Name Last		First	Middle
Other name you are known by or like to be called			
Present Address (If different from above) Street Address		City	State Zip Code
Permanent Address (Include area code) Street Address		City	State Zip Code
Telephone Numbers ()	Home ()	Message ()	Business ()

GENERAL INFORMATION

<p>Have you ever worked for Fremont Bank before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____</p> <p>If yes, indicate position _____ and branch/department _____</p> <p>If yes, describe your experience _____</p>
<p>If hired, do you have a reliable means of transportation to and from work? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Can you submit documentation of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>May we contact your previous employers? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Have you ever been involuntarily terminated from any job? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please indicate which job and explain the circumstances _____</p>
<p>Have you ever been convicted of a felony or misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(A conviction record will not necessarily disqualify an applicant from employment. In your response, do not include marijuana misdemeanors two or more years old.)</p> <p>If yes, state the nature of the crime(s), the date of the conviction(s) and the disposition of the case(s) _____</p>

POSITION OBJECTIVE

Position(s) desired	Salary desired	Geographic preference
If hired, what date can you start?	Type of employment desired <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary	
If part-time or temporary, list days, times and/or dates that you are available _____		
Are you available for work on Saturdays? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you available for work on Sundays? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How did you hear about Fremont Bank? <input type="checkbox"/> Fremont Bank Associate (List name) _____		
<input type="checkbox"/> College (List name) _____	<input type="checkbox"/> Job Fair (List name) _____	<input type="checkbox"/> Web site (List name) _____
<input type="checkbox"/> Newspaper (List name) _____	<input type="checkbox"/> Other (List name) _____	

PROFESSIONAL REFERENCES

A professional reference is a person with whom you've had a business relationship, and whom you feel has significant knowledge of your work. Please do not list family members or personal friends who do not have direct knowledge of your work.			
1. Name	Telephone no.	No. of years acquainted	
Address	Street Address	City	State Zip Code
2. Name	Telephone no.	No. of years acquainted	
Address	Street Address	City	State Zip Code
3. Name	Telephone no.	No. of years acquainted	
Address	Street Address	City	State Zip Code

EMPLOYMENT HISTORY

List present or most recent employment first. Please complete in full and account for all periods of unemployment. Do not write "see resume" in this section, as this application is considered a legal document and its completion is required for Fremont Bank's hiring purposes.		
Name of employer	Type of business	
Address	Job title	
Telephone no.	Supervisor	
Dates of employment (month/year) From / To /		
Beginning base salary \$	Ending base salary \$	Average variable compensation per year \$
Summary of duties		
Would you recommend this employer to others? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Reason for leaving		
May we contact your current employer even if an offer of employment has not yet been extended? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you accept an offer of employment, Fremont Bank intends to contact your current employer, even if you check "No." ____ Initial		
Name of employer	Type of business	
Address	Job title	
Telephone no.	Supervisor	
Dates of employment (month/year) From / To /		
Beginning base salary \$	Ending base salary \$	Variable compensation \$
Summary of duties		
Would you recommend this employer to others? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Reason for leaving		

EMPLOYMENT HISTORY (continued)

Name of employer		Type of business	
Address		Job title	
Telephone no.		Supervisor	
Dates of employment (month/year) From / To /			
Beginning base salary \$	Ending base salary \$	Variable compensation \$	
Summary of duties			
Would you recommend this employer to others? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason for leaving			

SKILLS & ABILITIES

Which types of computers are you able to operate? <input type="checkbox"/> IBM/Compatible <input type="checkbox"/> Macintosh <input type="checkbox"/> Neither <input type="checkbox"/> Other	
Please indicate special windows based software with which you are proficient	Typing WPM _____
With which of the following Microsoft Office programs are you proficient? <input type="checkbox"/> Word <input type="checkbox"/> Excel <input type="checkbox"/> PowerPoint <input type="checkbox"/> Outlook	
Please list any foreign languages in which you are fluent	written / verbal written / verbal
Please list any professional licenses you hold	
Please list other courses/training you have completed that relate to this position	
What special qualifications, skills, attributes, experiences or interests would you bring to this position?	
Please list any unusual life experiences, life accomplishments, personal growth opportunities, or previous accountability for results that have had a positive impact on you. Please exclude any references to activities involving ethnic, religious, gender, age or sexual orientation, as we are an Equal Opportunity Employer and are not permitted by law to ask questions that would provide us with this information.	
Are you committed to providing extraordinary service experiences for our clients and associates? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Why do you want to join the Fremont Bank team?	

EDUCATION

School	Name, city, and state	Number of yrs. completed	Did you graduate?	List of diploma, degree or certificate	Course study
High School			◇ Yes ◇ No		
Junior College			◇ Yes ◇ No		
College/ University			◇ Yes ◇ No		
Graduate/ Professional			◇ Yes ◇ No		
Other			◇ Yes ◇ No		
Are you attending school now? ◇ Yes ◇ No			What school?		
What program?			When will you graduate?		

OTHER INFORMATION YOU SHOULD KNOW

Thank you for your interest in Fremont Bank. When we need to expand our family, we search for bright, responsible, friendly individuals of all races, backgrounds and ages – from age 18 to retirees. As an applicant for employment at Fremont Bank, please be advised that:

- ◆ In order to provide a diverse work environment for our associates, Fremont Bank does not discriminate in hiring or employment on the basis of race, color, religion, age, sex, marital status, sexual orientation, national origin, or physical or mental disability that does not limit the applicant's ability to satisfactorily perform the essential functions of the job available with or without reasonable accommodation. Disabled veterans, Vietnam veterans and veterans in other classifications are protected by applicable law.
- ◆ To assist us in providing Fremont Bank associates with a safe work environment, and our clients with a trustworthy financial institution, we fingerprint and conduct a criminal records check on all incoming associates. Any associate for whom bonding is refused or whose FBI criminal records check reveals a criminal conviction involving breach of trust or dishonesty may be subject to immediate separation of employment from the Fremont Bank team.
- ◆ If hired, within 72 hours of employment you will be asked to present proof of authorization to work in the United States, in order for us to keep you as a valued associate. Failure to provide proper identification may delay placement on our payroll system, and ultimately result in separation of employment from the Fremont Bank team.
- ◆ In order to facilitate a drug-free work environment for our associates, we require that you submit to and successfully pass a drug/alcohol test prior to employment with the Bank. Those who refuse, or do not successfully pass this test, will be considered ineligible for joining or staying on our team.
- ◆ During your introductory period, you may be required to take and pass a basic math skills test, which is a core banking skill. Refusal to be tested may disqualify you from continued employment with the Fremont Bank team.
- ◆ Fremont Bank is an at-will employer and cannot promise or guarantee future employment. At-will means that at the option of Fremont Bank or the associate, the employment relationship may be ended with or without notice, and with or without cause, at any time.
- ◆ To assist us in the positive identification of all associates, Fremont Bank will request a consumer credit report for applicants who are being considered for employment. This report may include information regarding your creditworthiness, credit standing and credit capacity.
- ◆ Please be sure to complete this application accurately, as it is considered a legal document once signed.

**While we welcome an attached resume, please note that it acts only as a supplement to this application.
Please complete each section of this application in full, as incomplete applications cannot be processed.**

You will be contacted if your qualifications best match our employment needs.
We regret that we cannot respond to every application.

EMPLOYMENT RELATIONSHIP AGREEMENT AND APPLICANT DRUG TESTING CONSENT

Please read carefully, initial each paragraph, and sign and date below.

I hereby certify, under penalty of perjury under the laws of the State of California, that the information given in this application and attached resume is accurate, true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misrepresentation of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application, or for immediate discharge if I am employed, regardless of time elapsed before discovery and regardless of my job performance. ____ (Initials)

I hereby authorize and hold harmless Fremont Bank, its agents, representatives or affiliated companies (collectively referred to as Fremont Bank), to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize my former employers to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release and hold harmless Fremont Bank, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. I specifically authorize Fremont Bank to obtain a credit report on me from a Credit Reporting Agency of the Bank's choice, and I understand that I may request a copy of this report by checking the box here. ____ (Initials)

I understand that my employment is contingent upon proof of my identity and employment eligibility pursuant to the Immigration Reform and Control Act of 1986. I understand that I must be able to be covered by Fremont Bank's bond. If I am hired I must complete an individual bonding form, and will be terminated if I am not bondable. I understand that I will not be employed, or my employment will be terminated, if I am or have been convicted of a criminal offense involving dishonesty, breach of trust or money laundering, if I admit or have admitted such an offense, or if I agree or have agreed to enter into a pretrial diversion or similar program in connection with a prosecution such an offense. ____ (Initials)

I understand that if I am hired, I will be an at-will employee. This means that employment can be terminated, with or without cause, and with or without notice, at any time, at the option of Fremont Bank or myself. This agreement concerning at-will employment is intended to be the final and complete expression of the agreement between Fremont Bank and me as to the nature of our employment relationship, and it cannot be changed at any time except by a written contract signed by myself and the Board of Directors of Fremont Bank. I agree that no statements, promises, disciplinary systems, statements in the Employee Handbook, awards or recognitions, policies, conduct of any officer or employee of the bank including, without limitation, the award of bonuses, salary increases, promotions, raises, performance reviews, offer letters, memoranda or other Fremont Bank communication either verbal or written, or any other event or representation will be effective to change the at-will nature of my employment with Fremont Bank. This at-will statement shall be interpreted consistently with all other statements of at-will policy that are contained in the Employee Handbook or other at-will agreements, statements, or written policies of Fremont Bank. ____ (Initials)

I have received notice of and read the Fremont Bank Drug-Free Workplace and Drug/Alcohol Testing Policy, and I know that it includes a requirement of pre-employment drug testing for job applicants who receive offers, as a condition of employment. The test will detect the presence of controlled substances including, but not limited to, narcotics, marijuana, alcohol, drugs and amphetamines. I understand that I must pass the drug test before I can be hired by Fremont Bank, and I understand that a confirmed positive test result, or my refusal to submit to a test in the first place, will disqualify me from consideration for employment at this point in time. I have read Fremont Bank's Drug-Free Workplace and Drug/Alcohol Testing Policy. I am familiar with it, and agree to abide by it should I become employed with the company. ____ (Initials)

I hereby consent and specifically agree to submit to drug screening, which will include testing of my urine sample to determine the presence of illegal drugs or alcohol. I understand that the result of this testing will be used in determining my eligibility for hire. ____ (Initials)

I authorize Fremont Bank to release the sample and test results to any testing laboratory and medical review officer they may designate, and I authorize all testing results to be released to the Director of Human Resources, or his/her designee. I understand that all drug-screening test results and evaluations will be kept confidential, and will only be discussed or disclosed on a need-to-know basis. ____ (Initials)

By this authorization, I do hereby release Fremont Bank from any and all liabilities arising from the testing described and consented to herein, and from the release or use of the information derived or contained in the test results, including without limitation claims of invasion of privacy, discrimination, defamation or infliction of emotional distress. Except for gross negligence or willful misconduct, I do hereby release any doctor, medical personnel, hospital, medical center, clinic sample collection facility, testing laboratory, or other related person or entity or any of its representatives, from any and all liabilities arising from the testing described and consented to herein. This includes possible clerical or laboratory error. ____ (Initials)

I understand that completion of this form does not guarantee that I will be selected for employment with Fremont Bank. However, it is a necessary step in that direction. ____ (Initials)

The drug testing policy was clear to me and was written in words I understood. Any questions I had about the drug test were answered to my satisfaction. ____ (Initials)

I certify that I have read, understand and agree to the above.

Signature of Applicant	Date	/	/
Printed Name of Applicant	Date	/	/

THANK YOU FOR APPLYING WITH FREMONT BANK. WE WISH YOU GREAT SUCCESS IN ACHIEVING YOUR CAREER GOALS!



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DRESS CODE AND PERSONAL APPEARANCE

At Fremont Bank, we believe the success of our business is determined in part by establishing and maintaining a professional atmosphere. All associates are expected to maintain a clean and neat appearance, keeping in mind that clients often form opinions about the quality of our service and products based in part on personal appearance. We believe professional attire creates higher levels of client trust and satisfaction. All employees are expected to adhere to the following appearance guidelines:

- ◆ Fremont Bank associates are required to accept the department supervisor or manager's guidance and judgment regarding personal appearance and dress standards.
- ◆ Branch personnel will be required to provide black pants and white shirts for work attire. Please refer to the Community Bank-Branch Network Preferred Associate Attire; available in Human Resources and Branch Administration.
- ◆ All associates are expected to arrive at work clean and well groomed. Because we are in contact with others at work, all associates are expected to practice good hygiene (showering daily, brushing teeth and using deodorant).
- ◆ All clothing should be clean, neat and free from rips.
- ◆ Hair must be clean, neat and, if colored, a color that is a normal hair color (i.e., no burgundy, pink, blue, etc.). Men may have mustaches and beards; however, they must always be groomed, trimmed and no more than one inch in length.
- ◆ Earrings are acceptable; however, no more than two earrings should be worn on each ear while on duty. Rings through the nose, eyelid, tongue or body parts (other than ear lobes) that are visible to the public may not be worn while on duty.
- ◆ Clothing should be appropriate to the job within the Bank. If the job involves frequent client contact or if work is conducted in an area with client traffic, attire should reflect more "business" than "casual." At all times, for all associates, "classic attire" is preferred over "trendy attire."
- ◆ Men should wear ties and women should wear hosiery when appropriate to the client interaction. In other words, your image should reflect that of your client.
- ◆ Associates who do not have client contact or do not work in client traffic areas may wear shorts (no more than 3" above the knee) during the summer months (May through October) or on days projected to be hotter than 80 degrees.

GUIDELINES FOR ASSOCIATE APPEARANCE

The #1 Rule is "Use Good Judgment"

For professional overall appearance, associates must avoid:

- ◆ Clothing that is too tight, too loose, see-through/revealing/suggestive, soiled/stained, torn/frayed, wrinkled or otherwise in disrepair
- ◆ Clothing that is made of denim, Lycra or spandex materials
- ◆ Shoes that are scuffed or visibly worn
- ◆ Shoes without a back enclosure (for safety purposes)
- ◆ Beach shoes/sandals/flip-flops/athletic or tennis shoes
- ◆ Mini-skirts (over 3" above the top of the kneecap)
- ◆ Leggings/stirrup pants
- ◆ Hats/headbands
- ◆ T-shirts/sweatshirts/sweatpants/jogging suits
- ◆ Halter-tops/tube-tops
- ◆ Overalls
- ◆ Jeans (all colors)
- ◆ Too much jewelry/evening jewelry
- ◆ Too much/overpowering cologne/perfume
- ◆ Heavy make-up
- ◆ Dirty/oily/unkept hair
- ◆ Visible tattoos or visible body piercing (including the tongue)
- ◆ Boots with short skirts and walking/hiking boots

Exceptions: Couriers may wear clean white or black athletic shoes with shorts during the appropriate season.

Associates who are inappropriately dressed for work may be sent home by their manager or supervisor, and directed to return to work in proper attire. Non-exempt associates will not be compensated for their time away from work. If in doubt, associates should seek advice from their supervisor or the Human Resources Department. Chewing gum, eating or drinking while on duty in any client-contact position is also prohibited.



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FREMONT BANK ALCOHOL AND DRUG-FREE WORK ENVIRONMENT POLICY AND ALCOHOL AND DRUG TESTING POLICY

Fremont Bank is committed to providing a safe workplace that is free of alcohol and drugs. All associates are encouraged to come forward with any information regarding the use of alcohol, drugs or other substances that may affect a person's safe and/or efficient job performance.

Prohibited activities under the Drug-Free Environment policy include, but are not limited to:

- ◆ Unlawful possession, control, being under the influence of, use, distribution, manufacture or sale of illegal drugs or controlled substances during working hours and/or on Fremont Bank property at anytime. For the purpose of this policy, "illegal drugs" include both drugs that are not legally obtainable as well as drugs that are legally obtainable, but are used for illegal or unauthorized purposes. "Fremont Bank property" also applies to our parking lots, client property or any location where you may be performing work for Fremont Bank, including your own home during work hours (if you are telecommuting or working at home for any other reason).
- ◆ Reporting to work under the influence of intoxicating substances (including but not limited to prescription medication/drugs, over-the-counter medication/drugs, illegal drugs or alcohol) or discovering that prescription or over-the-counter medication/drugs impairs or adversely impacts your ability to work and not reporting it immediately to your Department supervisor/manager or to the Human Resources Department (this includes telecommuters).
- ◆ Failing to comply with an approved rehabilitation or mandated program referred by Fremont Bank as part of or in lieu of disciplinary action.
- ◆ Failing to report suspicions or knowledge of another associate who is or appears to be impaired by drugs or alcohol during work hours, at a Fremont Bank social event or while on Fremont Bank property.

NOTE: Associates may consume alcohol during certain Fremont Bank events and business development activities, but only when approved in advance by an Executive Vice President, President/CEO or Vice Chairman. This is not a blanket approval, meaning approval must be granted at each Fremont Bank event/activity prior to the associate consuming even one beverage containing alcohol. In no event is the associate to consume amounts of alcohol that exceed the legal limit for driving, nor may the associate drive under the influence of alcohol. Should an associate become intoxicated at a Fremont Bank event or business development activity, he/she must relinquish his/her vehicle keys to a person who is not intoxicated.

Violation of this policy will result in disciplinary action, up to and including immediate termination of employment, even for a first offense.

COMPLIANCE WITH THE DRUG-FREE WORKPLACE ACT

We comply with the Federal Drug-Free Workplace Act. Associates in violation of any criminal drug statute that occurs on Fremont Bank premises or while conducting Fremont Bank business must notify the Human Resources Department immediately. It is also the responsibility of the department supervisor/manager to ensure this policy is enforced if the department supervisor/manager has knowledge of this type of violation. Also, any associate convicted of any criminal drug statute must notify Human Resources within five days of a conviction. Failure to report may result in disciplinary action up to and including termination of employment. Those convicted of a drug statute violation may be required to satisfactorily participate in a certified rehabilitation program approved by Fremont Bank in order to continue their employment.

PRESCRIPTION AND OVER-THE-COUNTER MEDICATIONS/DRUGS

Prescription medication/drugs are permitted when used in strict accordance with a physician's direction when such use does not impair an associate's ability to safely and/or effectively perform his/her job duties. It is the associate's responsibility to inform their health care provider of their job duties and responsibilities in relation to potential drug interaction, especially those associates who work with machinery or who drive Bank vehicles.

Fremont Bank prohibits associates from reporting to work or continuing to work under the influence of prescription or over-the-counter medications or drugs that adversely impact their ability to safely and/or efficiently perform assigned duties. Associates must ask their physician or pharmacist whether the prescription medication/drugs may adversely affect their ability to safely and/or efficiently perform assigned duties.

- ◆ Where prescription or over-the-counter medication/drug use may impair an associate's ability to safely and/or effectively perform job duties, he/she must inform his/her supervisor/manager or the Human Resources Department prior to coming into or continuing to work. Likewise, associates must immediately report the realization that prescription or over-the-counter medication is impairing or adversely impacting their ability to work safely and/or effectively perform assigned duties to their supervisor/manager or the Human Resources Department. Associates need not reveal the type of prescription or over-the-counter medication/drugs or why it is being taken. The only information sought by Fremont Bank is the effect upon safety and/or performance.
- ◆ Associates who suspect or have knowledge of another associate who is or appears to be impaired by prescription or over-the-counter medication/drugs during work hours, must report the information to their supervisor/manager and the Human Resources Department.

ALCOHOL AND DRUG TESTING

In order to proactively promote an alcohol and drug-free work environment, Fremont Bank requires associates and applicants to submit to alcohol and drug testing under the following conditions:

FOR CURRENT FREMONT BANK ASSOCIATES

Alcohol or drug testing may be required when:

- ◆ An associate is found in possession of any controlled substance, alcohol or drugs, in violation of this policy, or when such items are found in an area controlled or used by an associate such as the associate's desk;
- ◆ A reasonable suspicion exists that the associate is under the influence of any controlled substance (alcohol and/or drugs), while on the job, in the workplace or at a client site;
- ◆ When an accident, near-miss or incident occurs in which safety precautions are violated or careless acts are performed, and a reasonable suspicion exists that the associate is "under the influence"; or
- ◆ During and/or after the associate has participated in an alcohol and/or drug rehabilitation program.

FREMONT BANK ALCOHOL AND DRUG-FREE WORK ENVIRONMENT POLICY AND ALCOHOL AND DRUG TESTING POLICY (continued)

Associates who refuse such testing, where there is evidence and/or the existence of reasonable suspicion that the associate is under the influence of any controlled substance (alcohol or drugs), are subject to immediate suspension with or without pay, and may also be subject to disciplinary action up to and including termination, depending on the circumstances.

Associates who drive Bank vehicles or who work in any or other mechanically or safety-sensitive positions may be required to undergo post accident alcohol and drug testing. Associates will be notified regarding the testing procedure and asked to provide written consent to undergo such testing at that time.

Associates will be asked to consent in writing to testing, and will be asked to sign an authorization for the test results to be released to Fremont Bank. Failure to consent to testing and the release of testing results will not result in disciplinary action in and of itself, but may result in being transferred to another job category.

Alcohol or drug testing will involve an initial screening test at a qualified laboratory. Test results will be kept as confidential as possible. A laboratory test that results in a positive finding for either alcohol or drugs may result in disciplinary action up to and including immediate termination of employment.

FOR APPLICANTS SEEKING EMPLOYMENT

Fremont Bank requires alcohol and drug testing of all prospective new hires after a conditional offer of employment, but before the applicant begins work. Testing positive will result in a withdrawal of the employment offer. Testing will be conducted through urine samples to determine the presence of alcohol or illegal substances. Any applicant whose test exceeds prescribed limits for alcohol or illegal drugs will not be eligible for hire.

In such instances, the applicant will be informed and provided an opportunity to demonstrate that the use of such substances is in accordance with a licensed physician's prescription, or that the test results are in error. Should an applicant not be able to provide satisfactory evidence regarding the illegal substance use, that applicant will be given no further consideration for employment. If an applicant refuses to submit to a pre-employment drug-screening test, he/she will be precluded from further consideration for employment.

Should positive results of a pre-employment alcohol and drug test be discovered after an associate has already started working for Fremont Bank, the associate will be contacted by the Human Resources Department. The associate will be informed of the test results, and provided an opportunity to demonstrate that the use of such substances is in accordance with a licensed physician's prescription, or that the test results are in error. Associates will be given up to two business days to provide appropriate documentation; however, during that time, the associate will be placed on a paid administrative leave, and will not be allowed to return to his/her workplace during that time. If appropriate documentation is provided (within two business days) that assists Fremont Bank in determining the associate's positive test result is in accordance with a licensed physician's prescription, the associate will be allowed to return to work. If the associate does not provide appropriate documentation within two business days, the associate will be terminated the morning of the third business day. If later the associate provides appropriate documentation and the original position remains available, he/she may reapply.

ALCOHOL AND DRUG RELATED INSPECTIONS AND SEARCHES

In order to promote a safe, productive, alcohol and drug-free workplace, Fremont Bank reserves the right at all times and without prior notice to inspect any and all Fremont Bank property for the purpose of determining if this policy, or any other Fremont Bank policy, has been violated. Such inspections may be conducted before or after business hours and in the presence or absence of the related associate(s). All personal vehicles and containers, including, but not limited to, briefcases, lunch boxes, back packs, purses or other such items brought onto Fremont Bank property are subject to inspection when Fremont Bank has reasonable suspicion that this policy has been violated. Refusal to cooperate in a search constitutes insubordination and Fremont Bank may take disciplinary action up to and including immediate termination of employment.

VOLUNTARY ADMISSION AND TREATMENT FOR CHEMICAL DEPENDENCIES (ALCOHOL AND DRUG ABUSE)

Fremont Bank encourages associates with alcohol or drug abuse problems to seek needed counseling and treatment. Associates who are unable to find assistance may contact the Human Resources Department to receive information about finding help. Communication initiated by associates and not as a result of a violation of this policy will be treated as confidentially as possible. Requesting assistance for substance abuse does not relieve associates of their responsibility to meet performance, safety and attendance expectations.

Fremont Bank will work with associates who have chemical dependencies (alcohol or drug) who voluntarily seek treatment and/or rehabilitation. Associates covered under our group medical plan may be eligible for assistance if the plan covers alcohol or drug rehabilitation treatment. Also, leaves of absence may be available through Disability Leave and Family/Medical Leave Act (see the Leaves of Absence section of this Handbook). We will make reasonable efforts to ensure that any disclosures you make to us concerning your participation in any alcohol or drug counseling or rehabilitation program will be treated confidentially.

Associates must use available sick leave and vacation accrual if rehabilitation requires time off from work. Associates must pay their own rehabilitation expenses unless coverage is provided under their health insurance policy.

Satisfactory participation in and completion of a rehabilitation program approved by Fremont Bank is a condition of continued employment. We are not obligated however, to continue to employ a person whose job performance is below standard because of alcohol or drug use, nor are we obligated to re-employ any person who has participated in treatment and/or rehabilitation if that person's job performance is below standard, if the associate engaged in misconduct beyond using illegal drugs or alcohol, or if a lay-off has occurred with the individual's current position.

Our policy on treatment and rehabilitation is not intended to affect our position regarding associates who violate the guidelines regarding the use of alcohol and/or drugs at work as described in the previous sections. Rather, rehabilitation is an option for an associate who acknowledges a chemical dependency and voluntarily seeks treatment to end that dependency.

VIOLATION OF ALCOHOL AND DRUG-FREE WORK ENVIRONMENT POLICY

Violation of our Alcohol and Drug-Free Work Environment Policy may result in disciplinary action, up to and including, immediate termination of employment. Fremont Bank, in its sole discretion, shall make necessary or appropriate disciplinary action in light of the particular facts and circumstances surrounding the violation. Fremont Bank may initiate discipline at any point when there is reasonable cause to believe that a violation of any portion of this policy has taken place. Fremont Bank may also report associates in violation of this policy to law enforcement authorities at its sole discretion.



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AUTHORIZATION FOR INVESTIGATIVE CONSUMER REPORT

By your signature below, you authorize Fremont Bank and Employee Relations, Inc., in connection with your application for employment with Fremont Bank, to obtain consumer reports and investigative consumer reports about you as described in the Applicant Notice and Disclosure for Investigative Consumer Report.

Today's Date

Applicant Signature

Applicant Name (print)



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APPLICANT NOTICE AND DISCLOSURE FOR INVESTIGATIVE CONSUMER REPORT

In connection with your application for employment with Fremont Bank, the Company will request a consumer report or an investigative consumer report from a consumer reporting agency, concerning information as to your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, mode of living, criminal history, work habits, performance and experience, along with reasons for the termination of your past employment from previous employers.

This information may be obtained by contacting your previous employers, associates, or from other individuals who may have knowledge concerning such information. This information may be obtained from sources, including private entities and federal, state, and local agencies that maintain records concerning your driving record, credit history, criminal record, civil matters, educational background and previous employers. Moreover, if you are subsequently hired by the Company, prior to or at any time after your employment commences, the Company may request such a consumer report or investigative consumer report as explained above and will notify you at the time that such report is being procured.

Fremont Bank will request this report from the following consumer reporting agency:

Employee Relations, Inc.
20720 Ventura Blvd., Suite 200
Woodland Hills, CA 91364
800-716-7773

A consumer report or an investigative consumer report may be obtained for employment purposes, as defined under the federal Fair Credit Reporting Act (FCRA) and California law. Specifically, this information may be requested for purposes of employment, promotion, reassignment, or retention as an employee.

Under California law, you have the right to receive a copy of the investigative consumer report obtained by the Company. The Company will request your report at the same time it request its report. This copy will be sent to your home address via U.S. mail, unless you request other arrangements.

The FCRA and California law give you specific rights regarding investigative consumer reports. The summaries of those rights under the FCRA and California law are provided with this Notice and Authorization. Specifically, you have the right to receive further written disclosure as to the nature and scope of the investigation. To do so, you should provide a written request within a reasonable period of time, not to exceed 30 days after the date of this document. Under California law, you have the right to inspect the files about you maintained by the investigative consumer reporting agency, Employee Relations, Inc. You also have the right to receive a copy of your file by certified mail, and a summary of certain information in your file by telephone. The investigative consumer reporting agency must provide trained personnel to explain the information in your file and provide a written explanation of any coded information. Finally, the agency is required to disclose the identity of other recipients of the investigative consumer report about you.

If we decide to take any employment action based in whole or in part on the information contained in the report, you will be notified of our decision. You also have the right to dispute, directly with the agency, the accuracy or completeness of any information in the report. An inquiry concerning your report or any information contained therein should be directed to the credit reporting agency.



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A SUMMARY OF YOUR RIGHTS UNDER THE CALIFORNIA CONSUMER CREDIT REPORTING AGENCIES ACT

You also have the following rights under the California Consumer Credit Reporting Agencies Act in regards to inspecting the file maintained on you by the CRA:

You have a right to obtain a copy of your credit file from a consumer credit reporting agency. You may be charged a reasonable fee not exceeding eight dollars (\$ 8). There is no fee, however, if you have been turned down for credit, employment, insurance, or a rental dwelling because of information in your credit report within the preceding 60 days. The consumer credit reporting agency must provide someone to help you interpret the information in your credit file.

You have a right to dispute inaccurate information by contacting the consumer credit reporting agency directly. However, neither you nor any credit repair company or credit service organization has the right to have accurate, current, and verifiable information removed from your credit report. Under the Federal Fair Credit Reporting Act, the consumer credit reporting agency must remove accurate, negative information from your report only if it is over seven years old. Bankruptcy information can be reported for 10 years.

If you have notified a consumer credit reporting agency in writing that you dispute the accuracy of information in your file, the consumer credit reporting agency must then, within 30 business days, reinvestigate and modify or remove inaccurate information. The consumer credit reporting agency may not charge a fee for this service. Any pertinent information and copies of all documents you have concerning an error should be given to the consumer credit reporting agency.

If reinvestigation does not resolve the dispute to your satisfaction, you may send a brief statement to the consumer credit reporting agency to keep in your file, explaining why you think the record is inaccurate. The consumer credit reporting agency must include your statement about disputed information in a report it issues about you.

You have a right to receive a record of all inquiries relating to a credit transaction initiated in 12 months preceding your request. This record shall include the recipients of any consumer credit report.

You may request in writing that the information contained in your file not be provided to a third party for marketing purposes.

You have a right to place a "security alert" in your credit report, which will warn anyone who receives information in your credit report that your identity may have been used without your consent and that recipients of your credit report are advised, but not required, to verify your identity prior to issuing credit. The security alert may prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that taking advantage of this right may delay or interfere with the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, insurance, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. If you place a security alert on your credit report, you have a right to obtain a free copy of your credit report at the time the 90-day security alert period expires. A security alert may be requested by calling the following toll-free telephone number: (Insert applicable toll-free telephone number).

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer credit reporting agency from releasing any information in your credit report without your express authorization. A security freeze must be requested in writing by certified mail. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, insurance, government services or payments, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. When you place a security freeze on your credit report, you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or authorize the release of your credit report for a specific party or period of time after the freeze is in place. To provide that authorization you must contact the consumer credit reporting agency and provide all of the following:

- (1) The personal identification number or password.
- (2) Proper identification to verify your identity.
- (3) The proper information regarding the third party who is to receive the credit report or the period of time for which the report shall be available.

A consumer credit reporting agency must authorize the release of your credit report no later than three business days after receiving the above information.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account, that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

You have a right to bring civil action against anyone, including a consumer credit reporting agency, who improperly obtains access to a file, knowingly or willfully misuses file data, or fails to correct inaccurate file data.

If you are a victim of identity theft and provide to a consumer credit reporting agency a copy of a valid police report or a valid investigative report made by a Department of Motor Vehicles investigator with peace officer status describing your circumstances, the following shall apply:

(1) You have a right to have any information you list on the report as allegedly fraudulent promptly blocked so that the information cannot be reported. The information will be unblocked only if (A) the information you provide is a material misrepresentation of the facts, (B) you agree that the information is blocked in error, or (C) you knowingly obtained possession of goods, services, or moneys as result of the blocked transactions. If blocked information is unblocked you will be promptly notified.

(2) Beginning July 1, 2003, you have a right to receive, free of charge and upon request, one copy of your credit report each month for up to 12 consecutive months.



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A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The Federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you – such as if you pay your bills on time or have filed bankruptcy – to creditors, employers, landlords and other businesses. You can find the complete text of the FCRA, 15 U.S.C. §§ 1681-1681u, at the Federal Trade Commission's Web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

You must be told if information in your file has been used against you. Anyone who uses information from a CRA to take action against you – such as denying an application for credit, insurance or employment – must tell you, and give you the name, address and phone number of the CRA that provided the consumer report.

You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every 12 months upon request if you certify that 1.) you are unemployed and plan to seek employment within 60 days, 2.) you are on welfare or 3.) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.

You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs – to which it has provided the data – of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who recently received your report be notified of the change.

Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.

You can dispute inaccurate items with the source of the information. If you tell anyone – such as a creditor who reports to CRA – that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

Outdated information may not be reported. In most cases, a CRA may not report negative information more than seven years old; 10 years for bankruptcies.

Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA – usually to consider an application with a creditor, insurer, employer, landlord or other business.

Your consent is required for reports that are provided to employers, or reports that contain medical information. A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers or employers without your permission.

You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.

You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court. The FCRA gives several different federal agencies authority to enforce the FCRA.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT (continued)

FOR QUESTIONS OR CONCERNS REGARDING:	PLEASE CONTACT:
CRAs, creditors and others not listed below	Federal Trade Commission, Consumer Response Center -FCRA Washington, DC 20580 202-326-3761
National banks, federal branches/agencies of foreign banks (word "National" or initials "N. A." appear in or after bank's name)	Office of the Comptroller of the Currency, Compliance Management, Mail Stop 6-6, Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board, Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision, Consumer Programs Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration, 1775 Duke Street Alexandria, VA 22314 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation, Division of Compliance & Consumer Affairs, Washington, DC 20429 800-934-FDIC
Air, surface or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture, Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051



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A SUMMARY OF YOUR RIGHTS UNDER THE CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT

You have the following rights under the California Investigative Consumer Reporting Agencies Act in regards to inspecting the file maintained on you by the Consumer Reporting Agency (CRA):

1. At your request and upon presenting proper identification, the CRA must allow you to visually inspect all files maintained regarding you. The CRA may withhold information about the sources of information except public records and records and/or records from databases available for sale, which were used solely to prepare the investigative consumer report.
2. The CRA must disclose to you the recipients of any Investigative Consumer Report furnished for employment purposes within the two-year period preceding the request.
3. Files maintained on you shall be available for your inspection as follows:
 - ◆ You may inspect your file(s) in person if you appear and furnish proper identification. Proper identification means information generally deemed sufficient to identify a person and includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. A copy of your files shall also be available to you for a fee not to exceed the actual costs of duplication services provided.
 - ◆ You may obtain a copy of your file by certified mail if you make a written request with proper identification for copies to be sent to a specified addressee. A CRA complying with a request for a certified mailing is not liable for disclosure to third parties caused by mishandling of mail after the mailing leaves the CRA.
 - ◆ A summary of all information contained in your files shall be provided by telephone, if you have made a written request, with proper identification for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
 - ◆ The CRA must provide trained personnel to explain to you any information, which you have a right to receive.
 - ◆ The CRA must provide a written explanation of any coded information contained in files maintained on you. This written explanation must be distributed whenever a file is provided to you for visual inspection as discussed above.
 - ◆ You have a right to be accompanied by one other person of your choosing, who shall furnish reasonable identification when inspecting your file. A CRA may require you to furnish a written statement granting permission to the CRA to discuss your file in another person's presence.