



### HOW TO APPLY

*For positions at the Eastern Region, South Portland, Maine office*

Thank you for your interest in employment with StanCorp Financial Group, Inc., the holding company for Standard Insurance Company, StanCorp Investment Advisers, Inc., StanCorp Mortgage Investors, LLC, and The Standard Life Insurance Company of New York.

If you apply online, complete this application in full. Resumés may be electronically sent. A separate application must be submitted for each position for which you wish to be considered.

Applications must be submitted by the closing date, if noted. We encourage you to submit your application as soon as possible as positions will close without notice once a sufficient qualification candidate pool has been identified. Please review your application to make sure it is complete and includes the following information:

- The exact position title
- The job requisition number

*Note:* Applicants selected for interviews will be asked to sign and date the applications and their Consent for Applicant Drug Testing and Release for Investigative Report.

### OUR PROCEDURE

- Your application will be reviewed in light of a current opening.
- If there is a match, we will contact you to schedule an interview.
- If you don't hear from us, you may assume your application is no longer being considered. Unfortunately, the volume of applications received precludes personal notification.

### HOW TO APPLY

- **Online**  
Complete an online application. If you wish to also send a resumé, you may send it through a separate online form found on the careers page at <http://www.stancorpfinancial.com/careers>.
- **In Person**  
The Eastern Region office is located at 75A John Roberts Road, South Portland, Maine, near the Maine Mall. The office is open 8 a.m. to 5 p.m. Eastern time. Position postings, description books and applications are available.
- **By Mail**  
Send your completed application to:  
Human Resources  
Standard Insurance Company  
75A John Roberts Road  
South Portland, ME 04106
- **By Fax**  
Fax completed applications to: (207) 541-4339

Thanks again for your interest. Best wishes in your job search!

*You may access our current openings and online application at <http://www.stancorpfinancial.com/careers>.*

### EEO Statement

Applicants for employment will receive consideration without discrimination because of race, color, gender, age, national origin, disability, sexual orientation, religion or veteran status. If you require a reasonable accommodation to participate in the pre-employment process, please advise the company's representative of your requested accommodation.



# The Standard<sup>SM</sup>

Standard Insurance Company  
StanCorp Mortgage Investors, LLC • StanCorp Investment Advisers, Inc.  
The Standard Life Insurance Company of New York

## Applicant Information

Have you worked for any of our subsidiaries before? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, INCLUDE DATES:
Are you currently working as a temporary in any of our subsidiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF YES, NAME OF TEMPORARY AGENCY:

The following information requested is needed to comply with federal regulations requiring certain employers to track data related to Equal Opportunity and Affirmative Action. The information will be used only in accordance with those laws and regulations and will be kept strictly confidential. This information will be processed separately from your application and any other employment records for this company before being referred to those handling position openings. We are an affirmative action, equal opportunity employer. If you should need accommodation to participate in this application process, please make your needs known at this time. Thank you for your assistance.

1) LAST NAME:	2) FIRST NAME:	3) MIDDLE INITIAL:
4) SOCIAL SECURITY NO.: (EXCEPT CALIFORNIA APPLICANTS)	5) APPLICATION DATE:	REQUISITION NUMBER: (SEE POSTING)
6) POSITION APPLIED FOR: (SPECIFIC TITLE)		7) GENDER: <input type="checkbox"/> Female <input type="checkbox"/> Male

### 8) Ethnic Information:

- Caucasian/White – a person having origins in Europe, North Africa or the Middle East.
- Black/African American – a person having origins in any black racial group.
- Hispanic – a person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin.
- Asian – a person having origins in the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.
- American Indian – a person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
- Other (Please specify): \_\_\_\_\_

### 9) How did you **initially** learn about this opening? Please check only **one** referral source:

- State Employment Office
- Newspaper Ad: \_\_\_\_\_ (NAME OF PUBLICATION)
- Employee Referral: \_\_\_\_\_ (NAME OF EMPLOYEE)
- Word of Mouth/Friend (Non-employee)
- Educational Institution: \_\_\_\_\_ (NAME OF INSTITUTION)
- Nonprofit Organization: \_\_\_\_\_ (NAME - PLEASE SPECIFY)
- StanCorp Financial Group Web site
- Oregonlive.com
- Dice.com
- CareerBuilder.com
- Walk-in to review job posting board
- Search Firm: \_\_\_\_\_ (NAME)
- Job Fair: \_\_\_\_\_ (PLEASE SPECIFY) \_\_\_\_\_ (DATE)
- Internet Job Board: \_\_\_\_\_ (PLEASE SPECIFY)
- Other: \_\_\_\_\_ (PLEASE SPECIFY)

What prompted you to check our Web site? \_\_\_\_\_ (PLEASE SPECIFY)

Interested applicants may review our Equal Employment Opportunity and Affirmative Action Policy statements in the reception area of our Human Resources offices.



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Standard Insurance Company  
StanCorp Mortgage Investors, LLC • StanCorp Investment Advisers, Inc.  
The Standard Life Insurance Company of New York

## Employment Application Process

Please complete this application in full. Resumés may be **attached but not substituted**. A separate application must be submitted for each position for which you'd like to be considered.

SPECIFIC POSITION APPLIED:		REQUISITION NUMBER:	DATE:
FULL NAME:		SOCIAL SECURITY NO.: (EXCEPT CALIFORNIA APPLICANTS)	
ADDRESS:	CITY:	STATE:	ZIP:
TELEPHONE:	WEEKDAY OR MESSAGE PHONE:	E-MAIL ADDRESS:	
IS THERE ANYONE IN THIS COMPANY WHO HAS REFERRED YOU OR WHOM YOU WISH TO USE AS A REFERENCE? Name:			
EMPLOYMENT DESIRED: <input type="checkbox"/> Full-time <input type="checkbox"/> Temporary		DATE AVAILABLE FOR WORK:	SALARY EXPECTED: (PER YEAR)

SCHOOLING	NAME AND LOCATION OF INSTITUTION	AREAS OF SPECIALIZATION	YEARS COMPLETED				GRADUATE		DEGREE
			1	2	3	4	YES	NO	
HIGH OR PREPARATORY SCHOOL			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
COLLEGE OR TECHNICAL SCHOOL			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
GRADUATE SCHOOL			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
CORRESPONDENCE COURSE			NUMBER OF MONTHS						
BUSINESS COLLEGE OR TRADE SCHOOL			NUMBER OF MONTHS						
DESIGNATIONS RECEIVED:									

### SKILLS SUMMARY

<input type="checkbox"/> Typing (WPM _____) <input type="checkbox"/> Data Entry <input type="checkbox"/> Dictaphone  <input type="checkbox"/> Switchboard or Telephone (How many lines) _____  <input type="checkbox"/> 10 Key <input type="checkbox"/> By Sight <input type="checkbox"/> By Touch	COMPUTER APPLICATIONS, PRODUCT KNOWLEDGE OR OTHER RELEVANT SKILLS:
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PLEASE SUMMARIZE THE SKILLS AND QUALIFICATIONS YOU POSSESS WHICH DIRECTLY RELATE TO THIS POSITION:

## EMPLOYMENT HISTORY

Please list below **all** paid or unpaid work experience, beginning with your present or most recent job. In addition, please provide information regarding **all** unemployment periods for the last seven years. Describe each job separately, emphasizing your specific tasks and responsibilities. If more space is needed, additional sheets may be attached.

PRESENT OR LAST EMPLOYER:		FROM: (MO)	(YEAR)
ADDRESS:		TO: (MO)	(YEAR)
YOUR STARTING POSITION:	CURRENT/ENDING POSITION:	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
SUPERVISOR'S NAME:	SUPERVISOR'S TELEPHONE NUMBER:	STARTING SALARY:	LAST SALARY:
SUPERVISOR'S TITLE:	EMPLOYER'S TELEPHONE NUMBER:	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES/RESPONSIBILITIES:			
REASON FOR LEAVING:			

EMPLOYER:		FROM: (MO)	(YEAR)
ADDRESS:		TO: (MO)	(YEAR)
YOUR STARTING POSITION:	CURRENT/ENDING POSITION:	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
SUPERVISOR'S NAME:	SUPERVISOR'S TELEPHONE NUMBER:	STARTING SALARY:	LAST SALARY:
SUPERVISOR'S TITLE:	EMPLOYER'S TELEPHONE NUMBER:	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES/RESPONSIBILITIES:			
REASON FOR LEAVING:			

EMPLOYER:		FROM: (MO)	(YEAR)
ADDRESS:		TO: (MO)	(YEAR)
YOUR STARTING POSITION:	CURRENT/ENDING POSITION:	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
SUPERVISOR'S NAME:	SUPERVISOR'S TELEPHONE NUMBER:	STARTING SALARY:	LAST SALARY:
SUPERVISOR'S TITLE:	EMPLOYER'S TELEPHONE NUMBER:	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No	
DUTIES/RESPONSIBILITIES:			
REASON FOR LEAVING:			

EMPLOYER:		FROM: (MO)	(YEAR)
ADDRESS:		TO: (MO)	(YEAR)
YOUR STARTING POSITION:	CURRENT/ENDING POSITION:	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
SUPERVISOR'S NAME:	SUPERVISOR'S TELEPHONE NUMBER:	STARTING SALARY:	LAST SALARY:
SUPERVISOR'S TITLE:	EMPLOYER'S TELEPHONE NUMBER:	MAY WE CONTACT THIS EMPLOYER?	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
DUTIES/RESPONSIBILITIES:			
REASON FOR LEAVING:			

EMPLOYER:		FROM: (MO)	(YEAR)
ADDRESS:		TO: (MO)	(YEAR)
YOUR STARTING POSITION:	CURRENT/ENDING POSITION:	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
SUPERVISOR'S NAME:	SUPERVISOR'S TELEPHONE NUMBER:	STARTING SALARY:	LAST SALARY:
SUPERVISOR'S TITLE:	EMPLOYER'S TELEPHONE NUMBER:	MAY WE CONTACT THIS EMPLOYER?	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
DUTIES/RESPONSIBILITIES:			
REASON FOR LEAVING:			

EMPLOYER:		FROM: (MO)	(YEAR)
ADDRESS:		TO: (MO)	(YEAR)
YOUR STARTING POSITION:	CURRENT/ENDING POSITION:	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time
SUPERVISOR'S NAME:	SUPERVISOR'S TELEPHONE NUMBER:	STARTING SALARY:	LAST SALARY:
SUPERVISOR'S TITLE:	EMPLOYER'S TELEPHONE NUMBER:	MAY WE CONTACT THIS EMPLOYER?	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
DUTIES/RESPONSIBILITIES:			
REASON FOR LEAVING:			

Pursuant to the Violent Crime Control and Law Enforcement Act of 1994, 18 USC § 1033 and 1034, we are required to ask the following questions:

Have you ever been convicted of a felony? .....  Yes  No  
Have you ever been convicted of a felony involving dishonesty or breach of trust? .....  Yes  No

If you answered yes to either question, describe in full below, or on a separate sheet, and attach to application packet. Disclosure of conviction will not necessarily result in denial of employment.

**APPLICANT CONSENT TO DRUG TESTING**

Thank you for your interest in employment with StanCorp Financial Group, Inc. and its subsidiaries. We have a strong commitment to provide a workplace free of alcohol and illegal drugs. It is our intention to provide a healthy and safe workplace for all of our employees as well as maintain an environment conducive to providing excellent service to our clients. In keeping with this commitment, we have a policy prohibiting illegal drugs and alcohol in the workplace.

A condition of employment with StanCorp Financial Group, Inc. or any of its subsidiaries is successful completion of drug testing performed on samples of urine provided by the candidate. These samples are tested for the presence of drugs that may be illegal or adversely affect job performance.

Please read and sign the consent section below. Only completed applications, including the signed consent forms, will be considered for employment. Your signature below signifies your consent to provide necessary samples at a designated facility, consent to have such samples tested for the presence of drugs, and authorizes the release of test results to the designated representative for its sole use in evaluating you for employment.

**I certify I am not a current illegal drug user.**

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**PLEASE READ BEFORE SIGNING**

I certify that all information provided on this application and all attachments is true and complete. I understand that any offer of employment will be contingent upon my submitting to and successfully passing a drug test, reference checks and a criminal background check. I release StanCorp Financial Group, Inc. and its subsidiaries and the testing laboratory from any and all liability and claims incident to such sample collection, testing and use of test results associated with my drug test. I consent to and authorize StanCorp Financial Group, Inc. and its subsidiaries to request any information concerning my current/previous employment and educational history and release all parties and persons connected with any request for information from all claims, liabilities and damages for whatever reason arising out of furnishing such information. If I am employed, I understand that I will be required to complete an Application for Fidelity Bond, and that if anything proves contrary to what I have stated or any material information is falsified or omitted on this Application for Employment or Application for Fidelity Bond, or if I am not bondable, my employment will be terminated and if not yet hired, I will not be eligible for future employment. I understand that if hired, I will be required to produce documents on my first day of employment that verify my identity and legal authorization to work in the United States. I understand that my employment with the company is not for a specific term, and that my employment or my compensation may be terminated at any time by either myself or the company, with or without cause or notice.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

StanCorp Financial Group, Inc. and its subsidiaries are equal opportunity employers and do not discriminate on the basis of gender, age, race, color, religion, national origin, disability, veteran status or sexual orientation.

**NOTIFICATION AND AUTHORIZATION FOR RELEASE OF CONSUMER REPORT  
AND INVESTIGATIVE CONSUMER REPORT**

In connection with my application for employment, and/or employment with this company, I understand and am hereby notified by this document that StanCorp Financial Group, Inc. and its subsidiaries are authorized to request a consumer report and/or an investigative consumer report from a consumer reporting agency for evaluation of me for employment (i.e., employment, promotion, reassignment or retention as an employee).

I understand that consumer reports may contain information from public records, including written, oral or other communications bearing on my character, general reputation, personal characteristics or mode of living, which may or may not be used as a factor for employment purposes. I understand that inquiries may include, but are not limited to, criminal background information, motor vehicle records, education and previous employment verification.

I further understand that investigative consumer reports may contain the same information as consumer reports listed above, except investigative consumer reports may be obtained through personal interviews with neighbors, friends or associates of mine and may or may not be used as a factor for employment purposes. I understand that I have a right to make a written request to the company for additional information concerning the nature and scope of the investigative consumer report requested and a written summary of my rights under the Fair Credit Reporting Act ("FCRA"), as amended.

In addition, I understand that you may request information from various federal, state and other agencies which maintain records concerning my past activities and history. I authorize without reservation any party or agency contacted by this employer to furnish the above-mentioned information.

I further authorize ongoing procurement of the above-mentioned reports at any time, either during the time my application for employment is being considered or throughout the duration of my employment in the event I am hired. In the event the company considers any information in these reports when making an adverse employment related decision affecting me, I understand I will be provided with information regarding the consumer reporting agency, a copy of the consumer report and a copy of your FCRA rights, before the decision is finalized.

I understand that I have rights under the FCRA as indicated above.

Name (printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_