

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

HRDC, in accordance with all applicable Federal and State Laws, does not discriminate in employment on the basis of the race, gender, color, religion, national origin, age or disability of any individual.

Date of Application _____

Position applied for: _____

Referral Source: Newspaper In-house Friend/Relative Employment Agency

Other (*please specify*) _____

Date Available to Begin Work: _____

Name: _____
last first middle

Present Address:

_____ *street city state zip*

Permanent Address: (*if different*)

_____ *street city state zip*

Telephone Number: (_____) _____

If you are related to anyone in our employ, or a member of a policy body associated with HRDC, state the name and department or policy body: _____

Have you filed an application here before? _____ (*yes or no*)

If yes, Date: _____ Position: _____

Are you a veteran of the U. S. Military Service _____ (*yes or no*)

If yes, what branch of service: _____ Dates of Service _____ to _____

Are you a U. S. citizen, or on a visa that would permit you to work here? _____ (*yes or no*)

If any of your employment or school records are listed under another name, please give name:

Do you have a driver's license? _____ (*yes or no*) If yes, what class _____

Have you ever been a member of Local # 27, Food and Commercial Workers Union? _____ (*yes or no*)

EDUCATION

	Elementary	High	College/ University	Graduate/ Professional	Business/ Trade
School Name and Location					
Years Completed (circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree					
Course of Study					

Describe Specialized Training, Apprenticeships, Skills and Extra-curricular Activities:

Honors Received:

List Professional, Trade, Business or Civic Activities and Offices held: (exclude groups which indicate race, color, religion, gender, national origin or disabilities).

EMPLOYMENT EXPERIENCE

List each job held. Start with your present or last job! Include Military Service assignments and volunteer activities.

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Employer	Telephone	Dates Employed		Summarize the type of work performed and job responsibilities:
	()	From	To	
Complete Address		Hourly Rate/Salary Starting		
Job Title		\$	per	
Immediate Supervisor		Hourly Rate/Salary Final		
Reason for Leaving		\$	per	

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Employer	Telephone	Dates Employed		Summarize the type of work performed and job responsibilities:
	()	From	To	
Complete Address		Hourly Rate/Salary Starting		
Job Title		\$	per	
Immediate Supervisor		Hourly Rate/Salary Final		
Reason for Leaving		\$	per	

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Employer ()	Telephone ()	Dates Employed From To	Summarize the type of work performed and job responsibilities:
Complete Address		Hourly Rate/Salary Starting	
Job Title		\$ per	
Immediate Supervisor		Hourly Rate/Salary Final	
Reason for Leaving		\$ per	

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Employer ()	Telephone ()	Dates Employed From To	Summarize the type of work performed and job responsibilities:
Complete Address		Hourly Rate/Salary Starting	
Job Title		\$ per	
Immediate Supervisor		Hourly Rate/Salary Final	
Reason for Leaving		\$ per	

If you need additional space, please continue on a separate sheet of paper.

Are you employed now? _____ (yes or no) If so, may we inquire of your present employer? _____ (yes or no)

Summarize special skills and qualifications acquired from employment or other experiences:

List name, address and telephone number of three professional references who are not related to you and are *not* previous supervisors. If not applicable, list three academic or personal references who are *not* related to you.

Name	Address	Business Position (if applicable)	Telephone Number

In case of emergency, notify

_____ name _____ relationship

_____ address _____ telephone #

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize Allegany County Human Resources Development Commission, Inc., (HRDC) permission to refer to each of my former employers and to any other person who may have information concerning me, requesting them to furnish to HRDC, Inc. a full transcript of their record of my service with them or any information they may have concerning me, particularly as to my character, habits, and ability, and the cause of my leaving their employ. As this information is furnished at my express request and for my benefit, I hereby release any such person from any and all liability of whatsoever nature on account of furnishing such information. I also agree that if I am employed by Human Resources Development Commission, Inc. a full transcript of my record, particularly as to my character, habits, and ability, and the cause my leaving such employment, may be given any person with whom I may thereafter seek employment, and I hereby release Human Resources Development Commission, Inc. and its subsidiary corporations from any and all liability of whatsoever nature on account of furnishing such information.

I understand my application will be kept on file for a period of one (1) year.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company.

"Under Maryland Law an employer may not require or demand any applicant for employment or prospective employment or any employee to submit to or take a Polygraph Lie Detector or similar test or examination as a condition of employment or continued employment. Any employer who violates this provision is guilty of a misdemeanor and subject to a fine not to exceed \$100.00."

Signature of Applicant

Date

ALLEGANY COUNTY HUMAN RESOURCES DEVELOPMENT COMMISSION, INC.

APPLICANT AFFIRMATIVE ACTION DATA RECORD

HRDC is committed to equal employment opportunity for all persons, regardless of race, color, creed, national origin, political affiliation, sex, disability or age.

Solely to help us comply with government record keeping, reporting and other legal requirements, and to assist the Equal Opportunity Officer in ascertaining if the objective of equal Employment Opportunity is being pursued, please fill the Data Record.

The information requested on this page is voluntary and will be separated from the application upon its receipt. The data record will be kept in a confidential file separate from the Application for Employment.

Thank you for your cooperation.

DATE: _____

POSITION APPLIED FOR: _____

NAME: _____ TELEPHONE: ()
last first middle

ADDRESS: _____
number street city state Zip

GENDER: Male Female DATE OF BIRTH: _____
month day year

RACE/ETHNIC GROUP: White Black Hispanic Asian Mixed Race

Signature: _____