



DEPARTMENT OF HUMAN RESOURCES

The Liberty Building
107 North Liberty Street
Centreville, Maryland 21617

Telephone (410) 758-4406
Facsimile (410) 758-6913

EMPLOYMENT APPLICATION

Instructions to Candidate-

1. Please complete all sections of this application by either legibly printing or typing it. Applications which cannot be read will not be considered.
2. If additional room is required to answer any question or provide additional information, please use a separate sheet of paper which includes your signature and date and attach it to this application.
3. In order to be considered for employment by the County, applicants must fully complete this application form and sign and date it where required.
4. Applications must actually be received by mail, facsimile or in person by the Queen Anne's County Department of Human Resources on or before the closing date established for the job announcement.
5. Direct questions concerning this application to the Queen Anne's County Department of Human Resources at the address or telephone number indicated above.
6. Employment applications will be considered for the specified position opening listed below only. Employment applications will be retained for a one-year period after which time they will be destroyed.
7. Queen Anne's County is an Equal Opportunity Employer and provides employment services without regard to race, color, religion, creed, gender, national origin, age, marital or veteran status, physical disabilities or any other legally protected status.

Candidate Information-

Name <input type="checkbox"/> Mr. or <input type="checkbox"/> Ms		Home Telephone Number
(Last)	(First)	(Middle Initial)
List any other name under which your educational or work records may appear		
Street Address		Cell Telephone Number
City	State	Zip Code
Home E-mail Address		Social Security Number (Optional)

Position Information-

Title of Position(s) Appling For

Applicants Must Answer The Following Questions-

1.	Are you legally eligible for employment in the United States of America? (If you are hired by Queen Anne’s County, you will be required to furnish proof of your eligibility for employment in the United States of America.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2.	Are you eighteen years of age or older? (If your answer is “No”, your employment is conditioned upon verification that you are of a minimum legal age to be employed in the position for which you have applied.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3.	Have you ever been asked to resign or resigned from a position in lieu of being fired? If your answer is “Yes”, please give the employer, the position you held, the reason for the employer’s action and the date you left employment.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.	Have you ever been convicted of a criminal offense in any court? (Exclude expunged convictions unless applying for a law enforcement Position.) If “Yes”, give date, place, charge, court and fine, sentence or conviction.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5.	Do you have any relatives currently employed with Queen Anne’s County? If “Yes”, list the employee’s name, department and relation to you.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6.	Have you previously worked for Queen Anne’s County? If “Yes”, list dates of employment, position, department and reason for leaving.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7.	Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8.	If selected for employment, on what date are you available to start work?		
9.	If selected for employment, what are your salary requirements?		

Motor Vehicle License Information-

Do you have a valid motor vehicle operator’s license or the ability to acquire one within thirty (30) days after employment? <input type="checkbox"/> No <input type="checkbox"/> Yes, provide the following information.	
License (Soundex) Number	
Issuing State	Expiration Date

Professional Certification- You need to only answer this question if the minimum qualifications for the position you are applying includes possession of a specific certification (CDL, Law Enforcement Certification, etc.).

Do you have the required certification or the ability to acquire it within the required period? <input type="checkbox"/> No <input type="checkbox"/> Yes, provide the following information.	
Certification Type	Certification Number
Issuing State	Expiration Date

Educational Information-

School	Name and Address of School	Course of Study	Circle Last Year Completed	Did You Graduate?	List Degree(s) Obtained
High School			1 2 3 4	Yes <input type="checkbox"/>	GED
				No <input type="checkbox"/>	
College			1 2 3 4	Yes <input type="checkbox"/>	
				No <input type="checkbox"/>	
Other (specify)			1 2 3 4	Yes <input type="checkbox"/>	
				No <input type="checkbox"/>	

References- Please list the names of three (3) individuals who are **not related to you** and who can attest to your work history, reliability and abilities.

1. Name	Street Address
City, State, Zip	Telephone Number
2. Name	Street Address
City, State, Zip	Telephone Number
3. Name	Street Address
City, State, Zip	Telephone Number

Employment Recognition and Awards- List any awards you have received for outstanding job performance. Include date, basis for the award and attach a copy or copies of documents evidencing such awards.

1.
2.
3.
4.
5.

Knowledge, Skills and Abilities- List and describe the knowledge, skills and abilities which you possess and which you believe will assist you in performing the tasks and functions of the position for which you have applied.

1.
2.
3.
4.
5.

Employment History- Beginning with your present or most recent employer, provide the following information for all employers during the ten (10) years prior to the date of this application. If you have additional employment that is relevant to the position for which you are applying, please list this as well. If more space is needed, please make a copy of this page to provide the additional information.

Current or Most Recent Employer

Employer		Position Title	
Street Address		City	
State	Zip Code	Telephone Number	
Name of Immediate Supervisor		Employed From	Employed To
Are you presently employed by this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes, when may we contact for a reference check?		Reason for leaving or considering leaving?	
List the top three (3) essential functions of your job with this employer? 1. 2. 3.			
What was your starting salary? \$		What is your current or ending salary? \$	
Did this employer use a performance evaluation system? <input type="checkbox"/> No <input type="checkbox"/> Yes, what was your last evaluation and when did you receive it?			

Second Most Recent Employer

Employer		Position Title	
Street Address		City	
State	Zip Code	Telephone Number	
Name of Immediate Supervisor		Employed From	Employed To
Reason for leaving?			
List the top three (3) essential functions of your job with this employer? 1. 2. 3.			
What was your starting salary? \$		What was your ending salary? \$	
Did this employer use a performance evaluation system? <input type="checkbox"/> No <input type="checkbox"/> Yes, what was your last evaluation and when did you receive it?			

Third Most Recent Employer

Employer		Position Title	
Street Address		City	
State	Zip Code	Telephone Number	
Name of Immediate Supervisor		Employed From	Employed To
Reason for leaving?			
List the top three (3) essential functions of your job with this employer? 1. 2. 3.			
What was your starting salary? \$		What was your ending salary? \$	
Did this employer use a performance evaluation system? <input type="checkbox"/> No <input type="checkbox"/> Yes, what was your last evaluation and when did you receive it?			

Fourth Most Recent Employer

Employer		Position Title	
Street Address		City	
State	Zip Code	Telephone Number	
Name of Immediate Supervisor		Employed From	Employed To
Reason for leaving?			
List the top three (3) essential functions of your job with this employer? 1. 2. 3.			
What was your starting salary? \$		What was your ending salary? \$	
Did this employer use a performance evaluation system? <input type="checkbox"/> No <input type="checkbox"/> Yes, what was your last evaluation and when did you receive it?			

Previous Employment With Queen Anne's County – If not already listed, please provide the following information regarding any previous employment with Queen Anne's County.

Position Title	Department
Employed From	Employed To
Reason for Leaving	

APPLICANT CERTIFICATION AND AUTHORIZATION

1. I certify and affirm that I have carefully reviewed all of the information I have supplied in this Employment Application and/or attached resume and that it is true and correct.
2. I specifically acknowledge that:
 - A. If, during the selection process, any information I have supplied on this Employment Application and/or attached resume is found to be incorrect or incomplete, I may be subject to disqualification from further consideration as a candidate for employment for furnishing false information.
 - B. If, after I have been employed by Queen Anne's County, any information I have supplied is found to be incorrect or incomplete, I may be terminated from employment by Queen Anne's County for furnishing false information.
 - C. If I am selected for employment, I will be required to pass a urinalysis test for designated controlled dangerous substances. After I am employed, I understand that I will be required to participate in random urinalysis testing.
 - D. If I am selected for employment, I will be required to pass a review of my driving record.
3. I authorize Queen Anne's County to solicit information regarding my character, general reputation, credit, current and previous employment and similar background information and to contact any current and previous employers and references I have listed on this application and/or attached resume. I authorize all current and previous employers to furnish Queen Anne's County information they may have regarding my employment and reasons I left employment. In consideration of Queen Anne's County's willingness to consider me for employment and to evaluate my credentials against other applicants and the willingness of my current and previous employers to supply information which is necessary to that process, I release, discharge and hold harmless Queen Anne's County and all current and previous employers from any liability whatsoever in connection with the furnishing or obtaining of employment information or arising out of the processing of this application and/or attached resume and consideration of my candidacy for the position for which I have applied.
4. Should I be employed by Queen Anne's County, I shall be an Employee-at-Will with the terms and conditions of my employment established by rules and regulations adopted by the Queen Anne's County Commissioners.
5. Photocopies of this authorization and of my signature hereon shall be deemed to provide the same release as my original signature.
6. I fully understood that provisions of the Applicant Certification and Authorization when I read them or they were fully explained to me by the Human Resources Department.

✕ _____
Applicant's Signature

✕ _____
Date

In accordance with Maryland law, it is the intention of Queen Anne's County to inform applicants of the following:

"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 subject to a fine not to exceed \$100.00" This disclaimer does not apply to any individual who applies for a position in the Queen Anne's County Office of the Sheriff.

✕ _____
Applicant's Signature

✕ _____
Date

