



10136 Southern Maryland Blvd. Dunkirk, MD 20754 301.812.1240
862 Costley Way Prince Frederick, MD 20678 443.486.4701
8323 Bayside Rd. Chesapeake Beach, MD 20732

Employment Application

Name: _____ Social Security # _____ Date _____

Address: _____

Phone Number: _____ E-Mail: _____

Referred By: _____

Which location are you applying to? Dunkirk Prince Frederick Ches. Beach Any location

Employment Desired

Position _____ Date you can start: _____

Are You Employed Now? Yes or No

If so, may we inquire your present employer? Yes or No

Have you ever applied to this company before? Yes or No Location? _____

Education History

High School _____ Years attended _____ Did you graduate?

College _____ Years attended _____ Did you graduate?

Trade, Business, or Correspondence School _____

Additional Training, Explain _____

Former Employers

Date From _____ to _____ Place of Employment _____

Salary _____ Position held _____ Reason for Leaving _____

Date From _____ to _____ Place of Employment _____

Salary _____ Position held _____ Reason for Leaving _____

Date From _____ to _____ Place of Employment _____

Salary _____ Position held _____ Reason for Leaving _____

References (please give the names of 3 persons not related to you that you have know for at least 1 year)

Name: _____ Phone Number _____ Years Known _____

Name: _____ Phone Number _____ Years Known _____

Name: _____ Phone Number _____ Years Known _____

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigations of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signing by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report of criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment.

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Date

Signature

Interview Remarks

Manager Signature _____