

Talbot County GovernmentAdministrative Services 11 North Washington Street Easton, MD 21601

Employment Application

Instructions: <u>Please read the official Job Description</u> for complete job information and requirements before filling out this application. Answer every question completely. Resumes or other kinds of applications cannot be substituted for this official Talbot County Government Employment Application; however, you may include a resume with this application if you wish. Please type or print clearly using <u>black ink</u>. Please include your full name on any additional pages.

	(PLEASE F	PRINT)			
Position(s) Applied For	•	•	Date of Application	on	
Last Name	First Name	:		Middl	e Initial
Address	City		State	Ziŗ	Code
Home Phone Number		Cell Phone Number			
Total Titole Tulinot		Cen i none i tumber			
E-mail address					
Do you have a valid Maryland driver's license?				□ Yes	□ No
If you are under 18 years of age, can you provide	required pro	oof of your eligibil	ity to work?	□ Yes	□ No
Have you ever filed an application with us before	?			□ Yes	□ No
11		If Yes	s, give date		
Have you ever been employed with us before?			, 6	□ Yes	□ No
		If Ves	s, give date	_ 130	_ 110
Are you currently employed?			,, 81	□ Yes	□ No
				□ Yes	□ No
May we contact your present employer?				□ i es	□ No
Are you prevented from lawfully becoming employisa or Immigration Status? Proof of citizenship or immigration status will be required up	•		ise of	□ Yes	□ No
On what date would you be available for work?					
Are you available to work: ☐ Full Time ☐ Par	rt time 🗆 S	Shift Work 🛮 Te	emporary		
Are you currently on "lay-off" status and subject t	to recall?			□ Yes	□ No
Can you travel if the job requires it?				□ Yes	□ No
Did you graduate from high school? ☐ Yes	□No	Do you hav	e a GED?	□ Yes	□ No
Name of School		_ Number:			
City/State:		State:			

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Major Field	Degree Type	Number of Years Attended	Degree Rec'd Yes/No
	Major Field	Major Field Degree Type	Major Rield Degree Type

Other Training: Describe any specialized training (*trade school, military training, law enforcement training, or specialized schooling*) you have received that may be relevant to this position. Include any licenses and certifications with numbers and expiration dates, if available.

Trade School/Organization Name	Type of Training	Describe	Certificate or License	Expiration Date

SKILLS

Other Skills or Abilities: Please describe your proficiency/skill/ability in the use of computer hardware and software, equipment/tools, or any other special skills or abilities that enhance your qualification for this position. Only include skills that you currently use or have maintained, and identify how you use those tools.

Specific Skill or Ability	Specific Tool/Equipment/ Hardware/Software	Proficiency Level (Advanced/Intermediate/Beginner)	How Used (Application)

Please rate your computer skills in the following areas:

Microsoft Word	Microsoft Excel	Microsoft Outlook
(None / Use Regularly / Very Skilled)	(None / Use Regularly / Very Skilled)	(None / Use Regularly / Very Skilled)

Language Skills: Please describe your proficiency/skill in foreign or sign language as identified below. For skill level please choose excellent, good or fair under reading, speaking, understanding and writing:

Language	Reading (Excellent/Good/Fair)	Speaking (Excellent/Good/Fair)	Understanding (Excellent/Good/Fair)	Writing (Excellent/Good/Fair)

		MILITARY	
Are you a veteran?		Date Entered:	
	PR	EVIOUS EMPLOYMEN	NT
Promotions as Separate Job please attach additional page	s. You must provides that provide all	e all of the information requested for the information requested for	paid, volunteer and military experience. List for each job you list. If more space is required, each job. A resume should be used only to and the job for which you are applying.
Company:		Address:	
Job Title:		Responsibilities:	
May we contact your previ	ous supervisor for	a reference? □ Yes □ No	
Job Title:		Responsibilities:	
From: To	o:	Reason for Leaving:	
May we contact your previ	ous supervisor for	a reference?	
Name of Supervisor:			Phone:
Company:		Address:	
Job Title:		Responsibilities:	
From: To	D:	Reason for Leaving:	
		a reference?	Phone:

	PREVIOUS EMPLOYMENT	
	(Continued)	
Company:	Address:	
Job Title:	Responsibilities:	
	Reason for Leaving:	
May we contact your previous	supervisor for a reference? ☐ Yes ☐ No	
Name of Supervisor:	Phone:	
	REFERENCES	
Please list three professional (Below), you may skip this sec	references. If you are authorizing us to contact at least the	aree previous supervisors
Name:	Relationship:	
Company:	Phone:	
Address:		
Name:	Relationship:	
Company:	Phone:	
Address:		
Name:	Relationship:	
Company:	Phone:	
Address:		

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

Applicant's Statement

	I certify that answers given herein are true and complete to the best of my knowledge.
	I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
	I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Talbot County.
	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 Talbot County.
	Signature of Applicant Date
	FOR DEPARTMENTAL USE ONLY
	Arrange Interview ☐ Yes ☐ No
	Remarks_
	Interviewer Date
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NO'	FS