



# TOWN OF ELKTON

100 Railroad Avenue, P.O. Box 157, Elkton, Maryland 21922-0157  
(410) 392-6933 FAX (410) 398-3792 TDD (410) 398-3653

## APPLICATION FOR EMPLOYMENT

This is an application for employment with the Town of Elkton, Maryland, a municipal government. Please complete this application legibly and in its entirety. If additional space is needed, please use the addendum to this form. Attach all documentation to this form.

The Town of Elkton provides equal employment opportunity to qualified persons without regard to race, color, creed, ancestry, religion, sex, age, national origin, disability, veteran status, marital status, political affiliation, sexual orientation, genetic background, or any other reasons as prohibited by Federal, State, or Local law. The Town provides accommodations to individuals with disabilities in accordance with the Americans with Disabilities Act.

POSITION APPLYING FOR: \_\_\_\_\_ [ASK FOR JOB DESCRIPTION]

## GENERAL INFORMATION

Name: \_\_\_\_\_  
(Last) (First) (Middle)

\_\_\_\_\_  
(Social Security Number) (Home Telephone Number) (Cell Phone Number)

\_\_\_\_\_  
(e-mail address)

List addresses where you have lived beginning with your current address, use back of page if needed.

(Number and Street Address)	(City)	(State)	(Zip)	(Years)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

How did you learn of this position? \_\_\_\_\_

Are any of your relatives employed by the Town? Yes \_\_\_ No \_\_\_ If yes, provide name and relationship:

Have you previously worked for the Town of Elkton? Yes\_\_\_ No\_\_\_ If yes, please indicate the dates of employment, last position held, department, supervisor, and reason for separation:

## EDUCATION

Name/Location	Years attended: (From: To:)	Graduated?	Course of Study
(High School)	_____	_____	_____
(College)	_____	_____	_____
(College)	_____	_____	_____
(Trade, Business, Technical School)	_____	_____	_____
(Graduate, Other)	_____	_____	_____

**WORK EXPERIENCE** *(Beginning with your current or most recent employment)*

**Name of employer:** \_\_\_\_\_ Employed from: \_\_\_\_\_ to: \_\_\_\_\_

Address where you worked: \_\_\_\_\_

Your last supervisor – Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Position and Job responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for separation: \_\_\_\_\_

May we contact your current employer: Yes: \_\_\_\_\_ No: \_\_\_\_\_

**Name of employer:** \_\_\_\_\_ Employed from: \_\_\_\_\_ to: \_\_\_\_\_

Address where you worked: \_\_\_\_\_

Your last supervisor – Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Position and Job responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for separation: \_\_\_\_\_

**Name of employer:** \_\_\_\_\_ Employed from: \_\_\_\_\_ to: \_\_\_\_\_

Address where you worked: \_\_\_\_\_

Your last supervisor – Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Position and Job responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for separation: \_\_\_\_\_

**Name of employer:** \_\_\_\_\_ Employed from: \_\_\_\_\_ to: \_\_\_\_\_

Address where you worked: \_\_\_\_\_

Your last supervisor – Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Position and Job responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for separation: \_\_\_\_\_

**Name of employer:** \_\_\_\_\_ Employed from: \_\_\_\_\_ to: \_\_\_\_\_

Address where you worked: \_\_\_\_\_

Your last supervisor – Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Position and Job responsibilities: \_\_\_\_\_

\_\_\_\_\_

Reason for separation: \_\_\_\_\_

**MILITARY SERVICE**

Branch of Service: \_\_\_\_\_ Rank: \_\_\_\_\_ Year From: \_\_\_\_\_ To: \_\_\_\_\_

Describe Training: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**NOTICES TO APPLICANT FOR EMPLOYMENT**

1. UNDER MARYLAND LAW, THE TOWN OF ELKTON 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. THE TOWN OF ELKTON IS SUBJECT TO MISDEMEANOR PENALTIES FOR VIOLATION OF THIS LAW AND A FINE NOT EXCEEDING \$100.00. THIS PROVISION DOES NOT APPLY TO APPLICANTS FOR EMPLOYMENT AS POLICE OFFICERS WITH THE ELKTON POLICE DEPARTMENT.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

- 2. You must be legally authorized to work in the United States under the United States immigration Reform and Control Act of 1986.
- 3. Applications for employment must be filed by the announced closing date of that position, if specified by the Town of Elkton.
- 4. Changes to your application must be brought to the attention of the Town of Elkton prior to any selection or notification of an interview for employment.

**Have you ever been convicted of a crime (other than minor traffic violations) which has not been expunged, annulled, pardoned, or sealed by a court? Yes \_\_\_\_\_ No \_\_\_\_\_ If "yes," give date, place of conviction, charge, and disposition of each case.**

**Note: A conviction may be relevant, if job related but will not necessarily bar you from employment.**

It is the policy of the Town of Elkton to maintain a workplace free from alcohol and drug abuse and its effects. As such, potential employees are subject to pre-employment drug testing as a condition of employment. If employed, all employees of the Town of Elkton are subject to random, post-accident and reasonable suspicion drug and alcohol testing. I consent to the Town's request for pre-employment, random, post accident, and reasonable suspicion drug and alcohol testing and release the Town, its employees and agents from all liability arising from the collection and testing process and employment decisions.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

I hereby affirm that this application contains no willful misrepresentations or falsifications and that the information given by me is true and complete to the best of my knowledge and belief. I understand that willful misrepresentations or falsifications may result in my application being disapproved, and employment with the Town of Elkton may be terminated on this basis.

I hereby authorize the Town of Elkton, by its agents and/or its employees, to inquire into my education, certifications(s), previous employment, or to otherwise verify the information I have provided with this application. I hereby hold harmless and waive all liability against the Town of Elkton and those companies, agencies, their agents and employees, as a result of any inquiries with regard to this employment application.

I understand and agree that nothing contained in this application shall indicate guaranteed employment and that if employed by the Town, employment is "at will"; that I am free to resign at any time and that the Town may terminate the employment relationship at any time with or without cause, except as may be provided under specific provisions.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Application reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

**AFFIRMATIVE ACTION/EQUAL EMPLOYMENT OPPORTUNITY**

The Town of Elkton is committed to the principle of equal employment opportunity. It is the Town's general policy to recruit, train, promote, and make all employment decisions without regard to race, creed, color, ancestry, religion, sex, age, national origin, disability, veteran status, marital status, presence of children, sexual orientation, genetic background, or any other reason as prohibited by Federal State, or Local law.

To reinforce the Town's commitment to equal opportunity, the Town has voluntarily adopted this policy on affirmative action.

This policy of nondiscrimination extends to all terms, conditions, and privileges of employment and to all personnel actions. Questions contained in the Application for Employment are not intended to be discriminatory based on any information.

The information requested below is voluntary and will be used to help the Town of Elkton complete statistical reporting. Remove this page from your application and return it with your application in the envelope, marked "**CONFIDENTIAL - HUMAN RESOURCES.**" Responses on this form are for our information only and have no effect on the hiring decision.

Thank you for your cooperation!

Position applied for: \_\_\_\_\_

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

Sex:            Male: \_\_\_\_\_            Female: \_\_\_\_\_

Race/Ethnic Identification:

\_\_\_\_\_ White/Caucasian, Indo-European, Pakistani, East Indian

\_\_\_\_\_ Black/African American, Jamaican, Trinidadian, West Indian

\_\_\_\_\_ Hispanic, Mexican, Puerto Rican

\_\_\_\_\_ American Indian, Alaskan Native

\_\_\_\_\_ Asian, Pacific Islander