APPLICATION FOR EMPLOYMENT We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin. PERSONAL INFORMATION **Social Security** Date Number Name Last First Middle **Present Address** Street City State Zip **Permanent Address** City Street State Zip Phone No. Referred ☐ No **EMPLOYMENT DESIRED** Date You Salary **Position** Can Start Desired If So May We Inquire of Your Present Employer? ☐ Yes Middle Are You Employed Now? ☐ Yes ☐ No ☐ No Ever Applied to this Company Before? Yes ☐ No Where? When? Circle Did You Subjects Studied and **EDUCATION** Last Year Completed Name and Location of School Graduate? Degree(s) Received ☐ Yes **Grammar School** ☐ No ☐ Yes **High School** 1 2 3 4 □ No ☐ Yes College 1 2 3 4 ☐ No Trade, Business or ☐ Yes Correspondence 1 2 3 4 School ☐ No **GENERAL** Subjects of Special Study or Research Work

Activities Other Than Religious

Job Related Skills (typing, driver's license, etc.)

FORMER EMP	PLOYERS List belo	w your last four employers, start	ing with the las	st one firs	st.		
Date Month and Year	Name and Address of Employer		Salary (upon leaving)		Position	Reason for Leaving	
From							
То							
From							
То							
From							
То							
From							
То							
REFERENCES List below three persons not related to you, whom you have known at least one year.							
Name		Address		Position		Years Acquainted	
1							
2							
3							
"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							

"It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability."

If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of such disclosure, In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if i am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. i understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filing out this form does not indicate there is a position open and does not obligate the Company to hire. If hired I agree to abide by all Company work rules policies and procedures. The Company retains the right to revise its policies or procedures in whole or in part, at any time.

Date Signature

MISDEMEANOR AND SUBJECT TO A FINE NOT TO EXCEED \$100."



NOTICE TO APPLICANTS AND EMPLOYEES

Screening tests for illegal drug use may be required before hiring and during your employment here.