

EMPLOYMENT EXPERIENCE: Start with your present or most recent. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, national origin, disabilities or other protected status.

Name and Address of Company and Type of Business	From		To		Starting Salary per _____	Ending Salary per _____	Reason for Leaving	Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Duties:							
Telephone:								
Name and Address of Company and Type of Business	From		To		Starting Salary per _____	Ending Salary per _____	Reason for Leaving	Supervisor
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	Duties:							
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	Mo.	Yr.	Mo.	Yr.				
	Duties:							
Telephone:								

I hereby give permission to contact the employers listed above concerning my prior work experience with the exception of:

Signed: _____

SPECIALIZED SKILLS

Indicate any skills acquired through training and/or experience:

<input type="checkbox"/> Typing Speed _____ wpm	<input type="checkbox"/> Software Packages (list any you are proficient with)
<input type="checkbox"/> Personal Computer	_____
<input type="checkbox"/> 10 key calculator	_____
<input type="checkbox"/> Other _____	_____

If applicable, what type of driver's license do you possess? *(Be prepared to provide a certified copy of your MVA driving record if you are selected to interview for a job requiring a driver's license.)*

State: _____ Class: _____ Number: _____

In what other State have you had a driver's license? _____

Are you fluent in a language other than English, including Sign Language? No Yes If yes, detail below:

Language: _____ Speak Read Write

Language: _____ Speak Read Write

Volunteer Work - Please list any volunteer work you have performed. You may exclude organizations that indicate race, color, religion, national origin, disabilities or other protected status.

Organization - Name and Address	Dates		Duties / Skills Acquired
	From:	To:	
	From:		
	To:		
	From:		
	To:		

Other Skills – Provide any additional information you feel may be helpful to us in considering your application including specialized training, certifications, skills, etc.:

PERSONAL REFERENCES (Do not include former employers or relatives):

NAME	ADDRESS	TELEPHONE

NOTICES

The following notice applies to everyone except applicants for law enforcement officer positions as defined by Article 27, Section 727, or any employee of any law enforcement agency of the State of Maryland, or any county, incorporated city or town, or other municipal corporation.

"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 AND SUBJECT TO A FINE NOT TO EXCEED \$100.00."

PRE-EMPLOYMENT TESTING PROCEDURES

Any offer of employment extended by the City of Laurel is subject to completion, to the satisfaction of the City of Laurel, of all pre-employment testing procedures, which will include a drug screen, a physical examination, and criminal records background check, and may also include a psychological examination, a driver's license check and a check of prior CDL alcohol and controlled substance testing results, if any.

THE CITY OF LAUREL IS AN EQUAL OPPORTUNITY EMPLOYER

Discrimination due to race, color, religion, national origin, age, sex, citizenship, disability and veteran status is prohibited.

AFFIRMATION

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize persons, schools, my current employer (if applicable) and previous employers and organizations named in the application (and accompanying resume, if any) to provide any relevant information that may be required to arrive at an employment decision, and release all parties from all liability for any damage that may result from furnishing same to you.

This application is not a contract and cannot create a contract. I understand that my employment can be terminated with or without cause, at any time, at the discretion of either the City of Laurel or myself.

My signature below certifies that I have read and understand the statements and notices contained in this document and agree to the terms and conditions.

SIGNATURE: _____ DATE: _____