



County Commissioners of Kent County
 400 High Street
 Chestertown, Maryland 21620
 (410) 778-4595

Employment Application

We consider applications for all positions without regard to age, race, color, religion, marital status, sex, national origin, physical or mental disability, sexual orientation, political affiliation, citizenship status, veteran status, genetic testing, or any other legally protected status. Applicants requiring reasonable accommodation to the application or interview process should promptly notify us.

Applicant Information

Position(s) Applied for: _____

Full Name: _____ Date: _____
Last First Middle

Address: _____
Street Address Apartment/Unit #

City State Zip Code

Email address: _____ Phone #(s): _____

Date Available: _____ Desired Salary \$ _____

Have you ever worked for Kent County Government in any of its departments? YES [] NO []
 If yes, when? _____

Do you have any relatives who are employed by Kent County Government in any of its departments? YES [] NO []
 Please list name and relationship: _____

Are you legally eligible to work in the U.S.? (Proof of citizenship or immigration status will be required upon hire). YES [] NO []

INSTRUCTIONS: A RESUME MAY BE SUBMITTED BUT IS NOT REQUIRED. FULL COMPLETION OF THE APPLICATION IS MANDATORY. FAILURE TO DO SO MAY RESULT IN DISQUALIFICATION OF THE APPLICATION. DO NOT DIRECT THE READER TO "SEE RESUME."

Education

HIGH SCHOOL: _____ Address: _____
 Number of years attended: _____ Did you graduate? YES [] NO [] Degree: _____

COLLEGE: _____ Address: _____
 Number of years attended: _____ Did you graduate? YES [] NO [] Degree: _____

OTHER: _____ Address: _____
 Number of years attended: _____ Did you graduate? YES [] NO [] Degree: _____

References (different from current or former supervisors)

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Current and Previous Employment (Must Provide a Minimum 10 Years; use extra pages if needed)

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO
[] [] If no, why?

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES N
[] [] If no, why?

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES [] NO [] If no, why?

Have you ever received any disciplinary action in a prior job, such as warnings, suspensions, probations or dismissals?
YES [] NO []

If yes, please explain:

Have you ever been charged with, disciplined for, or been the subject of an investigation involving sexual harassment or any other form of harassment including, but not limited to, race, age, religion, national origin or disability at a previous job?
YES [] NO []

If yes, please explain the nature of the charge, discipline, and/or investigation, and how the matter was resolved. (A positive response will not necessarily bar employment.)

Additional Information/Skills

Please list any additional information that relates to your ability to perform the job for which you have applied - such as licenses, job related skills, equipment or machinery skills, professional memberships, etc.

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____
If other than honorable, explain:

Disclaimer and Signature

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment. I have read the job specification and I am able to perform the job duties.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. Should I receive a conditional offer of employment, I understand that my fingerprints will be used to check the criminal history records of the state of Maryland and the FBI and the results will factor into the consideration of my employment with the County Commissioners of Kent County. I authorize review and full disclosure of all my records as part of this application process for consideration of my employment. I authorize all individuals, schools, and firms named herein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I understand that the Kent County Commissioners follow an "employment at will" policy, in that I or Kent County may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless it is specifically authorized in writing by an authorized executive of the Kent County Commissioners. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand that as part of a conditional offer of employment, I will be required to pass a drug screening test. Refusal to submit to or cooperate with the drug screens will disqualify me from further consideration for employment with the County. A positive test will disqualify me from County employment consideration for one year.

In the event of employment, I agree to abide by all the rules and regulations of the Kent County Commissioners.

This application for employment will be considered active for 45 days from the date of receipt.

Signature:

Date:

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. ANY EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

Signature:

Date:

Electronic Signature Agreement: By selecting the "I Accept" button, you are signing this Application electronically. You agree your electronic signature is the legal equivalent of your manual signature on this Application. **I Accept**

County Commissioners of Kent County
400 High Street
Chestertown, Maryland 21620



WE ARE AN EQUAL OPPORTUNITY EMPLOYER

01/21/2021