

# TOWN OF NEW WINDSOR

211 High Street – P.O. Box 609  
New Windsor, Maryland 21776

Phone 410-635-6575  
Fax 410-635-2995  
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## EMPLOYMENT APPLICATION

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### PLEASE READ BEFORE COMPLETING APPLICATION

It is the policy and practice of the Town of New Windsor to select new employees and to promote current employees based only on qualifications without regard to race, religion, national origin, sex, marital status, age, or disability. Each applicant appointed to a position must meet the requirements of that position. Such requirements may include successful completion of a verbal and/or written examination, a medical examination, a confidential background investigation, and the submission of certain documents.

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[Please type or print all answers in ink. Do not use a pencil.]

Date of Application: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

POSITION: \_\_\_\_\_ MINIMUM ACCEPTABLE SALARY: \$ \_\_\_\_\_

DATE AVAILABLE: \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Temporary \_\_\_\_\_

### PERSONAL QUALIFICATIONS STATEMENT

NAME: \_\_\_\_\_  
                    [Last]                                      [First]                                      [Middle Initial]                      [Maiden]

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: [home] \_\_\_\_\_ [office] \_\_\_\_\_ [cell] \_\_\_\_\_

### EDUCATION AND TRAINING

Circle Highest Grade Completed:    Did you graduate? Yes \_\_\_\_\_ No \_\_\_\_\_  
1 2 3 4 5 6 7 8 9 10 11 12        Date: \_\_\_\_\_ School: \_\_\_\_\_

Did you attend college/vocational school? Yes \_\_\_\_\_ No \_\_\_\_\_

If you attended college or vocational school, please complete the following [ includes military, trade, business, secretarial, etc.]:

1. Name of college/school: \_\_\_\_\_

Address: \_\_\_\_\_

Type of diploma/degree/certificate: \_\_\_\_\_ Date Received: \_\_\_\_\_

Number of credits: \_\_\_\_\_ Dates Attended [From/To] \_\_\_\_\_

2. Name of college/school: \_\_\_\_\_

Address: \_\_\_\_\_

Type of diploma/degree/certificate: \_\_\_\_\_ Date Received: \_\_\_\_\_

Number of credits: \_\_\_\_\_ Dates Attended [From/To] \_\_\_\_\_

## MILITARY SERVICE

A. Have you ever served on active duty in the U.S. military service? Yes \_\_\_\_\_ No \_\_\_\_\_

B. Have you ever been discharged from the armed services under other than honorable conditions? Yes \_\_\_\_\_ No \_\_\_\_\_

C. List dates, branch, and serial number of all active service [ enter "N/A" if not applicable]:

## EMPLOYMENT HISTORY

**INSTRUCTIONS:** Please provide a complete employment history, listing all positions held, including military, part-time, summer, and/or volunteer. If submitting a resume, complete all information except "Description of Duties and Responsibilities." Begin with current or most recent job or volunteer experience and work back. Account for periods of unemployment exceeding three months and your residence address at that time.

May inquiry be made of your present employer regarding your character, qualifications, and record of employment? Yes \_\_\_\_\_ No \_\_\_\_\_

A. Name and address of employer's organization [ include ZIP code, if known]:

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

Dates employed [ month/year]: \_\_\_\_\_ Number of hours per week: \_\_\_\_\_

Title of position: \_\_\_\_\_ Salary/earnings: \$ \_\_\_\_\_

Name/Title of Supervisor: \_\_\_\_\_

Telephone Number(s) of Supervisor: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Description of work [ describe your specific duties and responsibilities in this job]:

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\_\_\_\_\_

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**B. Name and address of employer's organization [ include ZIP code, if known]:**

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**Dates employed [ month/year]:** \_\_\_\_\_ **Number of hours per week:** \_\_\_\_\_

**Title of position:** \_\_\_\_\_ **Salary/earnings: \$** \_\_\_\_\_

**Name/Title of Supervisor:** \_\_\_\_\_

**Telephone Number(s) of Supervisor:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**Description of work [ describe your specific duties and responsibilities in this job]:**

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### **SPECIAL QUALIFICATIONS**

[ Clerical skills, typing, shorthand, computer, office equipment. Include active technical/professional licenses and numbers, academic or professional awards, memberships, etc. ]

**Do you speak another language other than English? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**If so, which language are you proficient in and indicate your level of proficiency.**

### **TO BE COMPLETED BY APPLICANTS APPLYING FOR POSITIONS WHICH REQUIRE DRIVING:**

**Do you possess a valid driver's license? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**If so, what is the expiration date and type of license:**

## REFERENCES

[List three persons who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Employment Experience.]

1. NAME/ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE NUMBER (S): \_\_\_\_\_

BUSINESS OR OCCUPATION: \_\_\_\_\_

2. NAME/ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE NUMBER (S): \_\_\_\_\_

BUSINESS OR OCCUPATION: \_\_\_\_\_

3. NAME/ADDRESS: \_\_\_\_\_

\_\_\_\_\_

TELEPHONE NUMBER (S): \_\_\_\_\_

BUSINESS OR OCCUPATION: \_\_\_\_\_

## GENERAL INFORMATION

[ Affirmative responses to the following questions will not automatically exclude you from employment consideration. A conviction or a firing does not necessarily mean you cannot be hired. The circumstances of the occurrence(s) and how long ago it (they) occurred are important. Give all the facts so that a decision can be made.]

Are you a citizen of the United States? If "NO" give country of which you are a citizen.

YES \_\_\_\_\_ NO \_\_\_\_\_ Country \_\_\_\_\_

Have you ever been dismissed or asked to resign from your position? If "YES" please explain:

YES \_\_\_\_\_ Explain:

NO \_\_\_\_\_

Have you ever been convicted of an offense in an adult court? If "YES" please explain:

YES \_\_\_\_\_ Explain:

NO \_\_\_\_\_

Have you pending criminal charges? If "YES" please explain:

YES \_\_\_\_\_ Explain:

NO \_\_\_\_\_

**Have you ever been an applicant or an employee of the Town of New Windsor?**

**YES** \_\_\_\_\_

**NO** \_\_\_\_\_

**If "YES" please supply the following information:**

**If Applicant:**

**Date of Application:** \_\_\_\_\_

**Position Applied for:** \_\_\_\_\_

**If Employee:**

**Dates of Employment:** \_\_\_\_\_

**Position/Title:** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**Please list below any additional information you consider pertinent to your application for employment [ including school honors, organization memberships, unique skills, etc.]**

**NOTICE OF INVESTIGATION**

**I hereby authorize investigation of all statements and information contained in this application for employment and the references listed therein.**

**I authorize all such references and former employers to release to the Town of New Windsor, Maryland any and all information concerning my employment and pertinent information they may have, personal or otherwise.**

**I release and hold all parties harmless from any and all liability for any damages that may result from furnishing information to the Town of New Windsor.**

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**Applicant's Signature**

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**Date**