



12609-13 HARFORD ROAD, KINGSVILLE, MD 21087
 410-592-5977 (F) 410-592-3541

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or veteran status.

PERSONAL:	Last Name	First	Middle	Date:
	Street Address			Home Phone
	City, State, Zip			Business Phone
	Have you ever applied for employment with us? Yes If Yes, Month and Year _____ No			Social Security #
	Position Desired			Date of Birth
	Apart from absence for religious observance, are you available for full time work? Yes No If no, What hours can you work?			Will you work overtime if asked? Yes No
	Other special training or skills (Languages, machine operation, etc...			When can you start?

EDUCATION:		Name and Location	Course of Study	Years Completed	Did you Graduate	Degree or Diploma
	Graduate					
	College					
	Business/Trade/ Technical					
	High School					
	Elementary					

Memberships in professional or civic organizations: (exclude those which may disclose your race, color, religion or national origin)
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EMPLOYMENT HISTORY:	Company Name:	Telephone:
	Address:	Employed (mm/yy) From To
	Name of Supervisor:	Weekly Pay Start Last
	Job Title:	Reason for Leaving:
	Job Description:	
	Company Name:	Telephone:
	Address:	Employed (mm/yy) From To
	Name of Supervisor:	Weekly Pay Start Last
	Job Title:	Reason for Leaving:
	Job Description:	
	Company Name:	Telephone:
	Address:	Employed (mm/yy) From To
	Name of Supervisor:	Weekly Pay Start Last
	Job Title:	Reason for Leaving:
	Job Description:	
	Company Name:	Telephone:
	Address:	Employed (mm/yy) From To
	Name of Supervisor:	Weekly Pay Start Last
	Job Title:	Reason for Leaving:
	Job Description:	

We may contact the employers listed above unless you indicate those	DO NOT CONTACT	
	Employer (s):	
	Reason:	

MILITARY:	Did you serve in the U.S. Armed Forces?	Which branch?
	Describe any training relevant to the position for which you are applying.	

GENERAL INFORMATION:

Sex:	Male Female	Are you a U.S. citizen? Yes No	Are you over 18 years of age? Yes No	If not, employment is subject to verification of age.
Provide dates you attended school:				
Elementary: From To		High School: From To		College: From To
Other (Give names and dates)				
Marital status:				
Single Seperated		Engaged Divorced		Married Widowed
Number of dependents including yourself:				
What was your previous address?		How long at previous address?		How long at present address?
Have you ever been bonded? Yes No				
If yes, with which employer?				
Have you ever been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by the courts? Yes No				
If yes, describe in full.				
State any relatives or friends working for us, other than your spouse.				

SIGNATURE:	<p>The information provided in this application for employment at Cherryworks, Ltd. Is true, correct and complete. If employed, any misstatement or omission of fact on this application, may result in my dismissal</p> <p>I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.</p> <p>If you decide to engage an investigative consumer reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained, you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of information contained in the report.</p> <p style="text-align: center;">_____ _____</p> <p style="text-align: center;">Date Signature</p>
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For Cherryworks Use Only	Date Application Received ____/____/____	Date Application Viewed ____/____/____	Date of Interview ____/____/____	Approved Denied
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“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. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.”

Signature

Date

THIS STATEMENT MUST BE ATTACHED TO ALL EMPLOYMENT APPLICATIONS IN THE STATE OF MARYLAND)

Department of Labor, Licensing and Regulation
Division of Labor and Industry
Employment Standards Service
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Baltimore, MD 21201
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