

# Application for Employment



**11735 Homewood Road  
Ellicott City, MD 21042**  
[www.archoward.org](http://www.archoward.org)

## We are an Equal Opportunity Employer

We are dedicated to a policy of non-discrimination in employment or any improper basis including race, color, age, sex, religion, creed, national origin, marital status, sexual orientation, political belief, or physical or mental handicap that does not prohibit performance of essential job functions

**Please answer all questions specifically and completely. Please provide exact dates.**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position(s) applied for: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Home phone: ( ) \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ Other phone: ( ) \_\_\_\_\_

Email address: \_\_\_\_\_

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

City: \_\_\_\_\_ County: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Referral Source:

Advertisement       Relative       Friend       Walk-in       School  
 Employment Agency       Other       Arc Employee (Name) \_\_\_\_\_

Have you ever applied for employment with us before?       Yes       No      *If yes, give date* \_\_\_\_\_

Have you ever been employed by us before?       Yes       No      *If yes, give date* \_\_\_\_\_

Type of employment desired?       Full-time       Part-time       Temporary

Date you would be available to begin work: \_\_\_\_\_ What is your desired salary? \_\_\_\_\_

Hours you would be available to work: \_\_\_\_\_

Days of the week you would be available to work (circle as many as apply):

Sunday      Monday      Tuesday      Wednesday      Thursday      Friday      Saturday

Have you ever pled "guilty" or "no contest" or been convicted of a crime other than a minor traffic offense?

Yes       No      *If yes, please explain:* \_\_\_\_\_

Are you legally eligible for employment in the United States?       Yes       No

Are you of legal age to work in the United States?       Yes       No

# Employment History

List your last three employers, beginning with the current or most recent. Please answer all questions specifically and completely.

Employer: _____	Address: _____
Phone# _____	Supervisor's Name and Title: _____
Job Title: _____	Dates employed: From: _____ To: _____
Starting Salary: _____	Ending Salary: _____
Starting Duties: _____	Ending Duties: _____
Reason for Leaving: _____	Are eligible to be rehired? _____
May we contact for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please state reason: _____	
How would this employer rate your performance? _____	

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Phone# _____	Supervisor's Name and Title: _____
Job Title: _____	Dates employed: From: _____ To: _____
Starting Salary: _____	Ending Salary: _____
Starting Duties: _____	Ending Duties: _____
Reason for Leaving: _____	Are you eligible to be rehired? _____
May we contact for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please state reason: _____	
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May we contact for a reference: <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please state reason: _____	
How would this employer rate your performance? _____	

Have you been discharged or forced to resign from any position in the last five (5) years? Yes No

If yes, please explain: \_\_\_\_\_

# Educational Background

School	School Name and Location	Course of Study	Did you graduate?	Degree or Diploma
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Please summarize any training, skills, licenses, or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. \_\_\_\_\_

Can you drive if the position requires it? Yes No

Do you have a valid Maryland driver's license if driving is an essential job function? Yes No

Has your driver's license ever been suspended? Yes No

If yes, please explain: \_\_\_\_\_

## References

Please list three (3) character references (non relatives) who have known you for the past three years or longer.

Name	Address	Occupation	Phone Number
1.			
2.			
3.			

# Important Information

***Please read the following application statement carefully and sign below.***

## **About the information on this application:**

I certify that the information on this application is true and correct. I understand that any false statements, misrepresentations, or omissions of fact on the application or during an interview may result in the rejection of my application or in separation from the Arc of Howard County if I become subsequently employed. I understand that The Arc does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

## **About investigations and information from current and former employers and/or personal references:**

I authorize The Arc of Howard County, Inc. to investigate all of the statements contained in this application in order to establish qualification for employment. I authorize the Arc to inquire of and receive information from my current and former employers and/or personal references as to my character and ability. I agree and hold The Arc, its agents, or representatives of the Arc and my current and former employers and/or personal references harmless from any claims or damages resulting from the transmittal, receipt, or use of any of the information described above.

## **About drug screening:**

I consent to taking a urine drug screen as required by The Arc of Howard County and such future drug/alcohol screens that will be required by The Arc of Howard County.

## **About investigative consumer reports:**

I further consent to the obtaining of investigative consumer reports from investigative or credit agencies on which The Arc may condition employment. These consumer reports may include credit reports, criminal history, arrest records, motor vehicle records, military records, or other sources of information. I understand that if a consumer investigative report is requested, I have the right, under The Fair Credit Reporting Act, to request in writing, within a reasonable time, a complete and accurate disclosure of the nature and scope of the investigation.

## **About proof of meeting minimum age requirements and the right to work in the United States:**

I agree to provide proof of meeting minimum age requirements of applicable laws and submit proof of my true age if I am employed. I also consent, if hired, to provide documentation of the right to work in the United States as required by Federal Immigration Laws under The Immigration Reform and Control Act of 1986.

## **About at-will employment:**

I agree, if employed, to conform to the guidelines and policies of the Arc of Howard County, Inc whenever adopted or changed by the Arc, and that those guidelines and policies do not constitute an employment contract. I further agree that if I accept a position with The Arc, my employment will be for an unspecified term and may be terminated at the will of either the Arc or myself, with or without cause, and with or without notice. No words or actions of the Arc will be deemed to create an express or implied contract of employment or require that the Arc have good cause for terminating my employment. This at-will agreement will remain in effect throughout the duration of my employment.

**Your signature below is required to be considered for employment.**

**I certify that I have read and fully understand and accept all of the terms of this application statement.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_