



APPLICATION FOR POSITION

Please fill out this application completely and carefully in your own handwriting. Feel free to add any additional information which will help in placing you where you are best qualified, and, if needed, attach a separate sheet.

As an Equal Opportunity Employer, consideration of every applicant will be based upon merit qualifications and ability and not on a basis prohibited by local, state, or federal laws.

Social Security No. _____

 (Last Name) (First) (Maiden or Middle)

 (Street & Number) (City) (State) (Zip Code) Yrs. There _____

Email: _____

Telephone: Home: _____ Cell: _____ Work: _____

Are you 18 years old or older? Yes No If under 18, state age _____

This question is asked only to determine if a work permit will be necessary in conformance with Maryland legislation.

Position Desired _____ Date available for employment _____

Salary Desired _____ Full time Part time Summer Temporary

Available for work: Day Night Sat. Sun.

Days and times not available _____

Referred by _____ Have you submitted an application before? _____

Ever employed by this Company? _____ When _____ Position _____ Where _____

Give names of relatives or friends employed by us: _____

Transportation _____

In case of emergency, notify _____
 (Name) (Address) (Telephone)

Are you legally eligible for employment in USA? Yes No

EDUCATION: CIRCLE LAST GRADE COMPLETED: 7 8 9 10 11 12; COLLEGE: 1 2 3 4; OTHER _____

List All Schools Name & Address of School Attended	Scholastic Average	Did you Graduate?	Degree	Major
High/Prep School				
College				
Other..... (Specify)				

Are you currently attending school? _____ Where _____ Courses _____

PREVIOUS EMPLOYMENT

Give present position first and work back to earliest. Please follow the requested numbered sequence.
Explain unemployed periods, if any. Use additional sheet if required.

1. Company Name 4. Supervisor's Name Title	2. Address	3. Phone No.	5. Position 6. Duties	Period Employed Month/Day/Year	Reason for Leaving
1.			5.	Starting	
2.			6.	/ /	
3.				Termination	
4.				/ /	
1.			5.	Starting	
2.			6.	/ /	
3.				Termination	
4.				/ /	
1.			5.	Starting	
2.			6.	/ /	
3.				Termination	
4.				/ /	

May we contact your present employer? _____ Number of days absent from school or work in last two years: _____

Have you ever been dismissed from or asked to leave any job? Yes No

If Yes, explain _____

MILITARY EXPERIENCE

Were you in the U.S. Armed Services? Yes No If Yes, What Branch? _____

Dates: From _____ To _____

Special Training or Experience _____

Rank at discharge _____ Are you a member of the National Guard or Reserve? Yes No

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 OR 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

DATE _____ SIGNED _____

I hereby authorize release of all information and transcripts from the above listed schools to Martins, Inc. The information given in this application is correct to the best of my knowledge, and you are authorized to VERIFY this information. I hereby release from all liability or damage those individuals or corporations who provide information relating to my prior employment or character.

It is understood and agreed that any misstatement made by me in this application will be sufficient cause for rejecting any application or discharge from the Company's service if I have already been employed.

DATE _____ SIGNED _____

DO NOT WRITE BELOW THIS LINE. FOR COMPANY USE ONLY

Location: East Crosswinds Camelot
 West Westminster Valley Mansion Other _____

Interviewed By _____ Date Interviewed _____

Hire Position _____ Rate _____ Start Date _____
 Full-time Regular Part-time Casual Hourly Salaried
 Reject Reason _____

Date of Birth _____ Condition of Hire _____