

**Presbyterian Church of Chestertown**  
 905 Gateway Drive, Chestertown, MD 21620  
 (410) 778-6057

**APPLICATION FOR EMPLOYMENT**  
**Please Print Clearly**  
 DATE \_\_\_\_\_

*Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Presbyterian Church of Chestertown.*

NAME \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 (LAST) (FIRST) (MI)

ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
 (STREET) (CITY) (STATE) (ZIP)  
 ALTERNATE NUMBER \_\_\_\_\_

TYPE OF WORK DESIRED	
DATE AVAILABLE FOR WORK	WORK LOCATION RESTRICTIONS (if any)

**GENERAL INFORMATION**

Can you perform all of the essential functions of the position for which you are applying with or without reasonable accommodation?	Y	N
Are you able to meet the attendance requirements of the position (including overtime, travel, etc., if required)?	Y	N
Are you at least 18 years of age?	Y	N
Would you work            FULL TIME _____    PART TIME _____	N/A	N/A
Some Positions require a background check – Do you release PCC to gain this information?	Y	N

**EDUCATION BACKGROUND**

NAME AND LOCATION	Years Completed	Graduate (Y/N)	Major Courses Studied Or Major and Degree (if applicable)
High School			
Trade School			
College			
Other			

**ADDITIONAL INFORMATION**

PLEASE LIST ANY SPECIAL SKILLS YOU MAY HAVE OR SUPPLEMENTARY INFORMATION YOU WISH TO PROVIDE FOR CONSIDERATION

RESUME ATTACHED  
Complete information below not covered on resume

**RECORD OF EMPLOYMENT**

**Please provide information on your last three employers, beginning with your current or most recent employer. Note that we may contact any previous employer to verify duties, reason for separation and other information.**

Name and Address of Employer	Job Title and Description of Duties	Start Date	End Date
Phone Number		Start Pay Rate Per	End Pay Rate Per
Immediate Supervisor Name and Title		Reason for Leaving	
May we contact you at work?	Y      N		

Name and Address of Employer	Job Title and Description of Duties	Start Date	End Date
Phone Number		Start Pay Rate Per	End Pay Rate Per
Immediate Supervisor Name and Title		Reason for Leaving	

Name and Address of Employer	Job Title and Description of Duties	Start Date	End Date
Phone Number		Start Pay Rate Per	End Pay Rate Per
Immediate Supervisor Name and Title		Reason for Leaving	

**REFERENCES** (In addition to immediate supervisors listed above)

Name and Address	Telephone	Years Known	Professional or Personal?	
	(      )		<input type="checkbox"/> Personal Contact	<input type="checkbox"/> Professional Contact
	(      )		<input type="checkbox"/> Personal Contact	<input type="checkbox"/> Professional Contact
	(      )		<input type="checkbox"/> Personal Contact	<input type="checkbox"/> Professional Contact

**ACKNOWLEDGEMENT – PLEASE READ**

I certify that all answers are given herein are true and complete to the best of my knowledge and acknowledge that any false information provided by me to PCC during the hiring process may constitute grounds for immediate discharge, regardless of when the false information is discovered by the company. I authorize and grant full consent to Presbyterian Church of Chestertown (PCC) to make such investigations and inquiries of my personal background and employment history and other related matters as may be necessary in arriving at an employment decision. I do further consent to the release and disclosure to PCC from any persons, company, corporations, or government agency any information sought concerning my background and hereby release from liability PCC for actions taken in connection with this investigation, as well as employers, schools, companies, or governmental agencies disclosing such information. I understand that if I am hired, I will be required to provide proof of identity and legal work authorization. I understand also, that I am required to abide by all current rules and regulations of PCC. I also acknowledge that if hired by PCC, my employment is at will, which means my that my employment, offer or acceptance of employment may be with drawn at any time, with or without cause and without prior notice at the option of PCC or myself. I understand that PCC may require medical or other examinations at the time of employment and may condition an offer on the successful completion of the exam and verification of my ability to perform the essential functions of the position offered

The employer 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. UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT 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 \$100.00.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_