

# Carroll County Detention Center

*100 North Court Street  
Westminster, MD 21157  
Phone: (410) 386-2610*

**EMPLOYMENT APPLICATION**

*An Equal Opportunity Employer*

Social Security No. \_\_\_\_\_

Date \_\_\_\_\_

Position Applied for \_\_\_\_\_

Name \_\_\_\_\_  
Last
First
Middle

Present Address \_\_\_\_\_  
Street
City
State
Zip

Home Phone No. \_\_\_\_\_ Work Phone No. \_\_\_\_\_

Vehicle Operators License No. \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_ Expires \_\_\_\_\_

Has your license ever been suspended or revoked in any State?      Yes                      No

If "yes", indicate which state, date and reason: \_\_\_\_\_

Have you ever been convicted of a crime (excluding minor traffic violations)? Conviction of a crime will not necessarily bar employment.

Yes      Date of conviction (year) \_\_\_\_\_      No      *Do not report any conviction for which the records have been officially expunged.*

If "yes", please explain. \_\_\_\_\_

Have you previously worked for the Carroll County Sheriff's Office?      Yes                      No      If "yes", when \_\_\_\_\_

Do you have any relatives including in-laws, members of your immediate family, and members of your extended family currently working for the Carroll County Sheriff's Office?      Yes                      No

If yes, \_\_\_\_\_  
Name
Department/Bureau
Relationship

How soon can you report to work? \_\_\_\_\_ Acceptable salary range \_\_\_\_\_

**Educational Data**

<p><b>Schools Attended</b> Did you successfully complete?</p> <p>Elementary      Yes      No</p> <p>Junior High      Yes      No</p> <p>Senior High      Yes      No</p> <p>If you did not graduate from high school, have you received a GED? Yes      No</p>	<p style="text-align: center;">Name and location of last school attended</p>	<p style="text-align: center;">List major courses taken</p>
<p>COLLEGE, UNIVERSITY or OTHER TRAINING Give name and location of College, University or Professional School</p>	<p style="text-align: center;">Major or Specialty</p>	<p>Degree or Certificate received? If yes, give title. If No, number semester hours or credits completed.</p>

**Professional Certifications**

State	Date	Number

Give employment record as completely as possible, **starting with your present or last position** not to exceed past 15 years. Attach additional sheets if necessary. **Note: This application must be fully completed whether or not a resume is submitted.**

<b>1. Employer/Firm</b>	<b>Address</b>	<b>Date Start</b>	<b>Date Finish</b>
	<b>Telephone</b>	<b>Salary Start</b>	<b>Salary Finish</b>
Type of Business	Reason for Leaving	Full-Time	Part-Time

Title of Position and Duties:

**Immediate Supervisor:** \_\_\_\_\_ **Title:** \_\_\_\_\_

<b>2. Employer/Firm</b>	<b>Address</b>	<b>Date Start</b>	<b>Date Finish</b>
	<b>Telephone</b>	<b>Salary Start</b>	<b>Salary Finish</b>
Type of Business	Reason for Leaving	Full-Time	Part-Time

Title of Position and Duties:

**Immediate Supervisor:** \_\_\_\_\_ **Title:** \_\_\_\_\_

<b>3. Employer/Firm</b>	<b>Address</b>	<b>Date Start</b>	<b>Date Finish</b>
	<b>Telephone</b>	<b>Salary Start</b>	<b>Salary Finish</b>
Type of Business	Reason for Leaving	Full-Time	Part-Time

Title of Position and Duties:

**Immediate Supervisor:** \_\_\_\_\_ **Title:** \_\_\_\_\_

Special equipment operated \_\_\_\_\_

**Business or Professional References Only – (Please do not list relatives)**

<b>Name</b>	<b>Address</b>	<b>Telephone #</b>	<b>Occupation</b>	<b>Years Known</b>
1.				
2.				
3.				

**Make sure you answer all the questions on this form. If you do not fill it out completely, it may result in the rejection of this application.**

In accordance with Section 3-702 of the Labor and Employment Article of the Annotated Code of Maryland applicants seeking employment with the Carroll County Detention Center may be required to submit to or take a lie detector test.

I have read and acknowledge the above statement regarding Maryland State Code and lie detector tests.

Signature

Date

I authorize the Carroll County Detention Center to investigate any and all statements made in this application. I also authorize my current or previous employers to verify the statements made in this application and to provide other employment data relating to my job performance, as required. I authorize the Carroll County Detention Center to contact my references.

Falsification or misrepresentation of the information submitted on this application could result in the disqualification of the applicant from further consideration for employment, or if the applicant has been hired, could result in his/her discharge from employment.

**Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**May we contact your present employer?**      **Yes**      **No**

*An Equal Opportunity Employer*

# EQUAL EMPLOYMENT OPPORTUNITY

## APPLICATION INFORMATION

The information requested below is needed to meet the requirements of certain federal regulatory agencies. It will be seen and tabulated by the Administrative Services Bureau. This section is separated from your application when received by the Administrative Services Bureau. This information is confidential and will **not** be used in any employment decision or in determining a test score. It will not be maintained in your personnel file if you become an employee.

**Please complete all items and return this form with your application.**

Name:

Date:

Position Applied For:

Sex:            Male

Female

Date of Birth:

Race/Ethnic Identification:

American Indian or Alaskan Native

Black, Jamaican, Trinidadian, West Indian

Asian or Pacific Islander

Hispanic, Mexican, Puerto Rican

White, Indo-European, Pakistani, East Indian

**How did you learn about this job opportunity?**

Newspaper (Name)

Job Fair (Where)

Carroll County Employee (Name)

BERC/Agency Referral

College Placement Office

County Bulletin Board

Internet

Job Hotline

Other

### **Carroll County Detention Center is an Equal Opportunity Employer**

The Carroll County Detention Center recognizes the rights of all people, including Detention Center employees, to equal opportunity. Discrimination against Detention Center employees on the basis of race, color, religion, age, gender, national origin, sexual orientation, and marital status, physical or mental disability is strictly prohibited. The Americans with Disabilities Act, Titles I and II, applies to Detention Center employment.

If you have questions, suggestions, or complaints, please contact Major Stephen C. Reynolds, Assistant Warden, Administrative Services Bureau and CCDC Americans with Disabilities Coordinator for Employment, at (410-386-2445). The mailing address is 100 North Court Street, Westminster, MD 21157.