



# Market Street Inn LTD.

## EMPLOYMENT APPLICATION

Should you need any special accommodations to participate in the application process (i.e. assistance in completing the application, accommodations for the interview, accommodations for any job-related employment tests, or any other needed accommodations please let us know at the time of application, or at the time an appointment is scheduled.

### Personal Information

Legal Last Name	Legal First Name
Social Security Number	Date Available to start work
Home phone number	Alternative phone number

Address (number, street, apartment number)

City State

Were you previously employed by Market Street Inn?  Yes  No If no, how were you referred?

If YES, Date: From \_\_\_\_\_ To \_\_\_\_\_ Advertisement( specify):

Position: \_\_\_\_\_ Employment Agency (Company):

\_\_\_\_\_ Employee Referral (Name of Employee):

\_\_\_\_\_ School:

\_\_\_\_\_ Other (specify):

### CAN YOU, AFTER EMPLOYMENT OFFER, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES?

Yes  No (In accordance with the immigration Reform and Control Act of 1986, any offer of employment is conditioned upon satisfactory proof of applicant's identity and legal ability to work in the United State.)

Are you authorized to work for all U.S. employers or only your current employer?  All  Current

Are you atleast 18 years of age?  Yes  No ( If less than 18 years of age, you will need to provide a work permit and/ or age certification upon offer of employment)

Have you ever been convicted of a felony?  Yes  No If YES, please explain: (such a conviction will not necessarily disqualify you from employment with Market Street Inn. Please attach an additional sheet if necessary).

### JOB INTEREST

Wage/ Salary desired: \$ \_\_\_\_\_ per \_\_\_\_\_ Preferred work schedule \_\_\_\_\_ Hours of Availability:

Position for which you are applying:	<input type="checkbox"/> Full-time		<b>Sun</b>	<b>Mon</b>	<b>Tues</b>	<b>Wed</b>	<b>Thur</b>	<b>Fri</b>	<b>Sat</b>
	<input type="checkbox"/> Part-time AM								
	<input type="checkbox"/> Temporary PM								

### Education Information

Type of School	Name and Location	Years Completed	Major Course of Study	Graduated	Degree
High School					
College/ University					
Graduate School					
Technical/ Business					

**INTEREST**

Please list any job related professional, trade business or civic activities, organizations, and associations in which you participated, or you are a member. (You may omit those that indicate race, color, religion, political affiliation, national origin, ancestry, disability, marital status, sex, or age.)

**Job-Related Skills or Experience**

List any job related skills or experience that would qualify you for the position for which you are applying:

**Employment History**

Starting with your most recent job, accurately list ALL jobs you have held in the past ten years. Give correct addresses and telephone numbers. Include volunteer experience.

Name of Current/ most recent employer Position Held  
1

Employer's address(number/ street) City State Zip

Dates Employed From To Position (starting):\$\_\_\_\_\_Final salary:\$\_\_\_\_\_  
\_\_\_\_Hourly \_\_\_\_ Weekly \_\_\_\_ Monthly \_\_\_\_ Yearly  
May we Contact employer? \_\_\_\_ Yes \_\_\_\_ No

Reason for leaving: Telephone Number: ( ) Supervisor:

Name of Current/ most recent employer Position Held  
2

Employer's address(number/ street) City State Zip

Dates Employed From To Position (starting):\$\_\_\_\_\_Final salary:\$\_\_\_\_\_  
\_\_\_\_Hourly \_\_\_\_ Weekly \_\_\_\_ Monthly \_\_\_\_ Yearly  
May we Contact employer? \_\_\_\_ Yes \_\_\_\_ No

Reason for leaving: Telephone Number: ( ) Supervisor:

Name of Current/ most recent employer Position Held  
3

Employer's address(number/ street) City State Zip

Dates Employed From To Position (starting):\$\_\_\_\_\_Final salary:\$\_\_\_\_\_  
\_\_\_\_Hourly \_\_\_\_ Weekly \_\_\_\_ Monthly \_\_\_\_ Yearly  
May we Contact employer? Yes No

Reason for leaving: Telephone Number: ( ) Supervisor:

## References

Please provide the names, addresses, and telephone numbers of at least three professional references who are not related to you.

1. Name	Title
Address	Telephone Number
2. Name	Title
Address	Telephone Number
3. Name	Title
Address	Telephone Number

## PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING BELOW

We greatly appreciate your interest in our organization. Please be advised that applicants are considered for all positions without regard to race, age, color, sex, religion, natural origin, disability, marital or veteran status. For consideration for employment with us, the application must be completed in its entirety and signed by you.

This application will remain open for consideration for the position for which you applied for ninety (90) days from today's date. If you wish to be considered for this position or another position after ninety days from this date, you will need to complete and submit another application.

I certify that the answers given by me are true and correct without omissions of any kind whatsoever, and that intentional falsification of information given will be grounds for disciplinary action, up to and including termination.

I understand any offer of employment may be contingent upon a credit and/ or criminal investigation. I hereby authorize all references and former employers listed on my employment application to give the company any and all information concerning my previous employment and any pertinent information they might have, personal or otherwise, and release all parties from any claims, causes of actions, or liability from damages that may or could result in furnishing such information to the company.

I Understand that if hired, the employment relationship is at-will. This means that either Market Street Inn or I may terminate the employment relationship at any time, for any or no reason,

**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 of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## OFFICE USE ONLY

NAME OF INTERVIEWER: \_\_\_\_\_ DATE OF INTERVIEW: \_\_\_\_\_