



**PRINCE GEORGE'S COUNTY GOVERNMENT
EMPLOYMENT APPLICATION**

Office of Human Resources
1400 McCormick Dr. Rm. 159
Largo, Maryland 20774

POSITION APPLIED _____

FOR: _____

ANNOUNCEMENT NUMBER: _____

SOCIAL SECURITY #: _____

NAME: _____
PLEASE PRINT LAST FIRST MIDDLE

ADDRESS _____
STREET

CITY STATE ZIP CODE COUNTY

TELEPHONE: HOME _____ BUSINESS _____
Area Code Area Code

A. Did you graduate from high school, or will you graduate within the next six months?
Yes Month/Year No Highest Grade Completed _____

Name and location (City and State) of last high school attended _____

High school course: Academic Business General Vocational
Do you have a high school equivalency diploma? Yes No
If yes, date received _____ Issuing Agency _____

ALL APPLICANTS PLEASE FILL IN THE FOLLOWING INFORMATION

Are you a current Prince George's County Merit System Employee? Yes No	B. College or University Give name & location _____ _____ _____	Major Field of Study _____ _____ _____	Dates Attended From To _____ _____	Degree & Date _____ _____	Credits Completed Sem. Qtr. Hrs. Hrs. _____ _____
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If you have worked for Prince George's County previously, please enter date of separation _____

P.G.C. FORM #501E (7/2015)

WORK EXPERIENCE

LIST JOBS STARTING WITH PRESENT AND WORK BACK TO BEGINNING OF EMPLOYMENT

Include your military or merchant marine service in separate blocks in its proper order and describe major duty assignments. Experience acquired more than 15 years ago may be summarized in one block if it is not applicable to the type of position applied for. Account for periods of unemployment in separate blocks. In examinations in which experience is a factor, credit will be granted for any civic, welfare, military, religious, and organizational activity which you have performed either with or without compensation. You may report such experience at the end of your employment history if you feel that it represents qualifying experience for the position(s) for which you are applying. Show actual time spent in each activity. Estimate number of hours worked per week in the space provided if you were on part-time work.

A RESUME MAY BE INCLUDED GIVING A MORE DETAILED DESCRIPTION OF WORK PERFORMED OR A LISTING OF ADDITIONAL JOBS. IF YOU SUBMIT A RESUME TO SUPPLEMENT YOUR WORK HISTORY, YOU MUST STILL ANSWER THE QUESTIONS ON THIS FORM ABOUT DATES, SALARIES, TITLES AND REASON FOR LEAVING.

PRESENT OR MOST RECENT POSITION:	Dates of Employment Month/Year From _____ To _____	Last Salary \$ _____ per Year Month	Avg. Hrs. Per Week _____ Full-Time Part-Time
Employer Name _____			
Address _____			
Supervisor's name and title _____		Telephone _____	
Your title _____	Describe your work: _____		

Reason for Desiring to Leave: _____

Number and types of positions you supervise(d): _____

PRESENT OR MOST RECENT POSITION:	Dates of Employment Month/Year From _____ To _____	Last Salary \$ _____ per Year Month	Avg. Hrs. Per Week _____ Full-Time Part-Time
Employer Name _____			
Address _____			
Supervisor's name and title _____		Telephone _____	
Your title _____	Describe your work: _____		

Reason for Desiring to Leave: _____

Number and types of positions you supervise(d): _____

PRESENT OR MOST RECENT POSITION:	Dates of Employment Month/Year From _____ To _____	Last Salary \$ _____ per Year Month	Avg. Hrs. Per Week _____ Full-Time Part-Time
Employer Name _____			
Address _____			
Supervisor's name and title _____		Telephone _____	
Your title _____	Describe your work: _____		

Reason for Desiring to Leave: _____

Number and types of positions you supervise(d): _____

USE THIS SPACE FOR ADDITIONAL OR EXPLANATORY INFORMATION
not listed elsewhere on this application. Refer to appropriate item number.

ITEM
NO.: _____

NOTE: UNDER THE IMMIGRATION CONTROL ACT OF 1986, AN EMPLOYER IS REQUIRED TO HIRE ONLY U.S. CITIZENS AND
LAWFULLY AUTHORIZED ALIEN WORKERS. APPLICANTS WHO ARE SELECTED FOR EMPLOYMENT WILL BE REQUIRED
TO SHOW AND VERIFY AUTHORIZATION TO WORK IN THE UNITED STATES.

9. Within the last five years, have you been fired for any reason? Yes No
10. Within the last five years, have you quit a job after being notified that you would be fired? Yes No
If "Yes", give details in space provided above.

The following notice applies to everyone except applicants for law enforcement officer positions as defined by Article 27, Section 727, or any employee of the any enforcement agency of the State of Maryland, or any county, incorporated city or town, or other municipal corporation.

"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 OF 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."

I hereby acknowledge that I have read and I understand the polygraph notice written above. I also hereby affirm that this application contains no willful misrepresentations or falsifications and that the information contained herein is true and accurate to the best of my knowledge. I understand that should investigation at any time disclose any misrepresentation or falsification of information contained in this document, my application will be disapproved and my name removed from any further consideration for employment. I also understand that should I be offered employment and accept a position with Prince George's County and it is subsequently discovered that the information provided herein is false, I may be terminated from employment pursuant to Section 16-193 of the Personnel Law of Prince George's County.

Date Signed: _____

Signature: _____

PRINCE GEORGE'S COUNTY GOVERNMENT TRACKING FORM

Please type or print.

Announcement Number

Social Security Number

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Office Use Only

Code	Date		
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Name: _____	_____	_____
Last	First	Middle
Street: _____		
City: _____	State _____	Zip _____

Home Telephone

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Work Telephone

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PLEASE NOTE: The following information is used for statistical and record keeping purposes only. This information is voluntary/confidential and will not subject applicant to adverse treatment.

Sex (check one)

- M Male
- F Female

Race (check one)

- W White (Caucasian)
- M Native American
- S Hispanic (including persons of Mexican, Puerto Rican, Cuban or other Spanish origin)
- B African American
- O Asian or Pacific Islanders

Date of Birth

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Residence (check one)

- | | | |
|--------------------------|------------------------|--------------------|
| A Prince George's County | E Howard County | I Arlington County |
| B Charles County | F Montgomery County | J Fairfax County |
| C Calvert County | G St. Mary's County | K Fairfax City |
| D Anne Arundel County | H District of Columbia | L Alexandria |
| M Other (specify) _____ | | |

THE PRINCE GEORGE'S COUNTY GOVERNMENT

This acknowledges receipt of your application for the position of

with the Prince George's County Government.

THANK YOU

Name _____

Street _____

City _____ State _____ Zip _____

