



ATTN: Human Resources
Post Office Box 120
Queenstown, MD 21658

TEL 410-827-8881
FAX 410-827-8190
HR@queenstownbank.com

Application for Employment

PLEASE READ BEFORE FILLING OUT THIS APPLICATION

QUEENSTOWN BANK OF MARYLAND is an Affirmative Action/Equal Opportunity Employer and does not discriminate in hiring or employment on the basis of race, color, religious creed, national origin, sex, physical handicap, covered veteran status, or on the basis of age against persons whose age is over forty. No question on this application is intended to secure information to be used for such discrimination.

Please answer every question. Please write legibly or print.

PERSONAL

Last	First Name	Middle Initial	Date
Present Address	City	State	Zip Code
Phone Number	Cell Phone	E-Mail Address	

Have you applied for work with us before? Yes No Date: _____

Have you ever worked for us? Yes No When and in what capacity? _____

Was it under a different name? Yes No If yes, in what name? _____

Position or type of work for which you are applying: _____ Full Time Part Time

If requesting part time, specify daytime or evening hours when you would be available: _____

Salary desired: \$ _____ Location Preference: _____ Date Available: _____

Are you able to perform the essential functions of the position you are applying for? Explain. _____

How were you referred to us?

- | | | |
|--|--|--|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Employment Agency | <input type="checkbox"/> Employee Referral |
| <input type="checkbox"/> Self-Initiated | <input type="checkbox"/> Community Agency | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> State Employment Agency | <input type="checkbox"/> School | _____ |

In order to be employed by the Bank, you must be legally eligible for employment under Department of Justice regulations. Proof of eligibility will be required upon employment. Can you meet this requirement? Yes No

Do you have a relative working for us? If yes, give the employee's name and relationship: _____

EMPLOYMENT

(List in order - last or present employer first. Include part-time jobs, summer or volunteer work, self-employment and periods of military service.)

Present position title: _____ Date of employment: _____

Name of employer: _____

Employer address: _____ Phone: (_____)
Street City State Zip Code

Name and title of immediate supervisor: _____

May we contact at this time? Yes No Salary: _____

Description of responsibilities (include number of people supervised): _____

Why would you consider leaving? _____

Position title: _____ Date of employment: _____

Name of employer: _____

Employer address: _____ Phone: (_____)
Street City State Zip Code

Name and title of immediate supervisor: _____

May we contact at this time? Yes No Salary: _____

Description of responsibilities (include number of people supervised): _____

Why would you consider leaving? _____

Position title: _____ Date of employment: _____

Name of employer: _____

Employer address: _____ Phone: (_____)
Street City State Zip Code

Name and title of immediate supervisor: _____

May we contact at this time? Yes No Salary: _____

Description of responsibilities (include number of people supervised): _____

Why would you consider leaving? _____

Did you work for any of the above employers under a different name? Yes No

If yes, what name? _____ Which employers are affected? _____

Briefly summarize activities and supply dates for periods of time not accounted for above: _____

SPECIFIC SKILLS Check skills you have or equipment you can operate:

- | | | |
|--|-------------------------------------|--|
| <input type="checkbox"/> Computer | <input type="checkbox"/> Calculator | <input type="checkbox"/> Counting Currency |
| <input type="checkbox"/> Teller Terminal | <input type="checkbox"/> Telephone | <input type="checkbox"/> Filing |
| | <input type="checkbox"/> Copier | <input type="checkbox"/> Business Math |
| Computer Software: | | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Outlook | <input type="checkbox"/> Word | <input type="checkbox"/> Excel |
| | | <input type="checkbox"/> QuickBooks |

If the position you are applying for requires driving, do you have a valid driver's license? Yes No

EDUCATION

Name	Location (City, State)	Major course or subject	Circle last year completed	If graduated, month, year & type of degree	Credit hours completed
High School or Preparatory			1 2 3 4		
Business School/Vo-Tech/Other			1 2 3 4		
College			1 2 3 4		
College			1 2 3 4		
Graduate Work			1 2 3 4		

Are you planning to pursue further studies? Yes No Where? _____ Day Night

What courses are you planning on taking? _____

CAREER OBJECTIVES Please enter your career objectives: _____

AFFILIATIONS/MEMBERSHIPS/ETC. List professional organizations, memberships, and activities excluding any which indicate the race, religion, sex or national origin of their members: _____

REFERENCES List three persons (not relatives, former employers or fellow employees) whom you have known for at least one year.

NAME	ADDRESS	PHONE NUMBER (if known)
_____	_____	_____
_____	_____	_____
_____	_____	_____

DECLARATIONS

Have you ever been convicted of any criminal offense involving dishonesty or breach of trust?

Yes No If yes, please explain. _____

Have you been convicted of any crime in the last five (5) years?

Yes No If yes, please explain. _____

Have you ever been denied a surety bond?

Yes No If yes, please explain. _____

PLEASE READ BEFORE SIGNING

I hereby certify that information on this application is accurate and complete to the best of my knowledge, and subject to verification by **QUEENSTOWN BANK OF MARYLAND**. I understand that in the event of my subsequent employment:

- I will be required to complete this application and other employment forms and documents and that any omission or misrepresentation of facts called for may be cause for immediate dismissal,
- I may be required to submit to a physical exam as a condition of continued employment.

I understand that this application will remain in **QUEENSTOWN BANK OF MARYLAND**'s active files no longer than 180 days, after which time I must re-apply to be considered for further openings.

I understand that this application and other matters connected with my application do not constitute a contract, express or implied, with the Bank, and that any employment with the Bank is at will, and may be terminated at any time, with or without notice, and with or without cause.

SIGNATURE

DATE

INVESTIGATIVE REPORTS

I understand that in examining my qualifications, it may be necessary to verify details of my employment and personal history. Investigative reports may be obtained by **QUEENSTOWN BANK OF MARYLAND** for evaluation. These reports may include information concerning my work history and financial responsibility.

I further understand that I have the right to make a request of the Bank, in writing, to learn the complete nature and scope of such investigative reports, if they are obtained.

I authorize current and previous employers to release all information regarding my employment records and employment history with them.

I certify that I have received and read a copy of this statement and hereby authorize **QUEENSTOWN BANK OF MARYLAND** to obtain reports as described above.

SIGNATURE

DATE

PLEASE READ AND SIGN THE FOLLOWING STATEMENTS, REQUIRED BY LAW:

Lie Detector Tests

“UNDER MARYLAND LAW AN EMPLOYER MAY NOT REQUIRE OR DEMAND ANY APPLICANT FOR EMPLOYMENT OR PROSPECTIVE EMPLOYMENT OR ANY EMPLOYEE TO SUBMIT TO OT TO TAKE A POLYGRAPH LIE DETECTOR OR SIMILAR TEST OR EXAMINATION AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. ANY EMPLOYER WHO VIOLATES THIS PROVISISON IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT TO EXCEED \$100.”

SIGNATURE

DATE



BACKGROUND CHECK DISCLOSURE

Queenstown Bank of Maryland may order a “consumer report” (a background report) or “investigative consumer report” on you in connection with your employment application, and if you are hired, or if you already work for the Company, may order additional background reports on you for employment purposes, to the maximum extent permitted by applicable law.

The background check company, ADP Screening and Selection Services, will prepare the background report for the Company. ADP Screening and Selection Services is located at 301 Remington Street, Fort Collins, CO, 80524, and can be reached by phone at 800-367-5933 or at their Internet Web site address www.adpselect.com.

The background report may contain information concerning your character, general reputation, personal characteristics, mode of living, criminal history, and credit standing. An “investigative consumer report” is a background report that includes information from personal interviews. Information may be obtained from private and public sources and for investigative consumer reports from personal interviews as noted above. You may request more information about the nature and scope of an investigative consumer report, if any, by contacting the Company.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will find these rights summarized in the document titled A Summary of Your Rights Under the Fair Credit Reporting Act, as provided on subsequent pages.



AUTHORIZATION FOR BACKGROUND CHECKS

I authorize Queenstown Bank of Maryland to obtain my background report, including investigative consumer reports. I also agree that a copy of this form is valid like the signed original. I understand that, as allowed by law, Queenstown Bank of Maryland may rely on this authorization to order additional background reports, including investigative consumer reports, from companies other than ADP Screening and Selection Services without asking me for my authorization again, as allowed by law. I understand Queenstown Bank of Maryland may order a background report under my legal name and any other names I may have used.

I also authorize the following agencies and entities to disclose to ADP Screening and Selection Services and its agents all information about or concerning me, as allowed by law, including but not limited to: my past or present employers; learning institutions, including colleges and universities; law enforcement and all other federal, state and local agencies; federal, state and local courts; the military; credit bureaus; testing facilities; motor vehicle records agencies; if applicable, worker's compensation injuries; all other private and public sector repositories of information; and any other person, organization, or agency with any information about or concerning me. The information that can be disclosed to ADP Screening and Selection Services and its agents includes, but is not limited to, information concerning my employment history, earnings history, education, credit history, motor vehicle history, criminal history, military service, professional credentials and licenses and substance abuse testing.

Check this box if you would like a free copy of your background check report:

STATE LAW NOTICES If you live or work for the Company in the states listed below, please note the following:
MASSACHUSETTS: If you submit a request to us in writing, you have the right to know whether the Company ordered an investigative consumer report from ADP Screening and Selection Services, which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications. You may inspect and order a free copy of the report by contacting ADP Screening and Selection Services.

MINNESOTA: If you submit a request to us in writing, you have the right to get from the Company a complete and accurate disclosure of the nature and scope of the consumer report or investigative consumer report ordered, if any, from ADP Screening and Selection Services, which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications.

NEW JERSEY: If you submit a request to us in writing, you have the right to know whether the Company ordered an investigative consumer report from ADP Screening and Selection Services which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications. You may inspect and order a free copy of the report by contacting ADP Screening and Selection Services.

NEW YORK: If you submit a request to us in writing, you have the right to know whether the Company ordered a consumer report or an investigative consumer report from ADP Screening and Selection Services which may include any or all of the following: criminal history review, driving record review, credit report review, and employment/education verifications. You may inspect and order a free copy of the reports by contacting ADP Screening and Selection Services. By signing below, you certify you have received a copy of Article 23A of the New York Correction Law is being provided with this form.

WASHINGTON STATE: You also have the right to ask ADP Screening and Selection Services for a written summary of your rights under the Washington Fair Credit Reporting Act.

Please print your legal name:

Last Name _____ **First** _____ **Middle** _____

Signature

_____/_____/_____
(Month/Day/Year)

BACKGROUND CHECK INFORMATION

The information requested below is collected solely for the purpose of aiding Queenstown Bank of Maryland in running a background check in connection with your application. The employer is requesting that you provide this information to assist in conducting a thorough background check.

First Name _____ Middle Name _____ Last Name _____

For Identification Purposes Only: Date of Birth ____/____/____ (Month/Day/Year)

Social Security Number _____

Driver's License Number _____ State Issuing License _____

Enter Nickname(s) Used _____

Enter Any Other Names Used (including maiden names):

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

Current Street Address _____

City/State/ZIP _____

Prior Street Address _____

Prior City/State/ZIP _____

From ____/____/____ (Month/Day/Year) To ____/____/____ (Month/Day/Year)

Addresses Within the Past Seven Years (*use a separate sheet as needed*)

Past Street Address _____

City/State/ZIP _____

Prior Street Address _____

Prior City/State/ZIP _____

From ____/____/____ (Month/Day/Year) To ____/____/____ (Month/Day/Year)

Please print your legal name:

Last Name _____ **First** _____ **Middle** _____

Signature _____ / / _____
(Month/Day/Year)



CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer’s credit file. Upon seeing a fraud alert display on a consumer’s credit file, a business is required to take steps to verify the consumer’s identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- **information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-567-8688.
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

• You have the right to dispute incomplete or inaccurate

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center - FCRA 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which creditor operates or Federal Trade Commission: Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>



Job Applicant Self-Identification Form

We are a government contractor subject to all provisions of The Civil Rights Act of 1964, Executive Order 11246 (as amended), The Rehabilitation Act of 1973 (as amended), and The Vietnam Era Veterans' Readjustment Assistant Act of 1974 (as amended). Qualified applicants are considered without regard to race, color, sex, age, religion, national origin, genetic information, pregnancy, disability, or protected veteran status.

In order to help us comply with government regulations, we would like you to answer the questions listed below. **YOU ARE NOT REQUIRED TO PROVIDE THIS INFORMATION.** This form will be kept strictly confidential and separate from your Employment Application.

Last Name	First Name	Middle Initial
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Gender: (Please check one)

- Male
- Female

Race/Ethnicity: (Please check one)

- Hispanic or Latino
- White (Not Hispanic or Latino)
- Black or African American (Not Hispanic or Latino)
- Asian (Not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
- American Indian or Alaska Native (Not Hispanic or Latino)
- Two or More Races (Not Hispanic or Latino)

Are you a Protected Veteran? (Please check one)

- Yes, I am a *Protected Veteran.
- No, I am not a Protected Veteran.

Disability Status: (Please check one)

- Yes, I am an **individual with a disability.
- No, I do not have a disability.
- I do not wish to answer.

*Protected Veteran Categories/Definitions

- Disabled veteran:
 - a veteran of the U.S. military, ground, naval, or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation; under laws administered by the Secretary of Veterans Affairs for a disability; or
 - a person who was discharged or released from active duty because of a service-connected disability
- Recently separated veteran: any veteran during the three –year period beginning on the date of discharge or release from active duty in the U'S military, ground, naval, or air service
- Active duty wartime or campaign badge veteran: any veteran who served on active duty in the U.S military, ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge has been authorized under laws administered by the Department of Defense
- Armed Forces service medal veteran: any veteran who, while serving on active duty in the U.S military, ground, naval, or air service, participated in a United States military operation for which an Armed Forces service medal was awarded, pursuant to Executive order No. 12985

** Individual with Disability: any person who (i) has a physical or mental impairment which substantially limits one or more of such person's major life activities; (ii) has a record of such impairment; or (iii) is regarded as having such impairment