

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



TEL 410-827-8881
 FAX 410-827-4343
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

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: _____

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		
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? _____

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: _____ Dates 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: _____ Dates 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: _____ Dates 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? _____

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

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

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)

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
