



APPLICATION FOR EMPLOYMENT
City of Hyattsville, Maryland
www.hyattsville.org

Please return application to:
Vivian Snellman
Human Resources Director
City of Hyattsville
4310 Gallatin Street
Hyattsville, MD 20781
301/985-5007 (fax)
vsnellman@hyattsville.org

Section I: Position of Interest

I am interested in the following position: _____

Consider me for similar positions: Yes No

I am available to work: Full-time Part-time

I expect _____ salary.

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

Section II: Personal History

Name: _____
Last First Middle

Current Address: _____
Street Apt. No. City State Zip

Telephone Number: _____

Email address (optional): _____

Are you legally able to work in the United States? Yes No
Proof of identity will be required upon offer of employment.

Are you a licensed driver? Yes No

For positions that require a valid driver's license, please indicate which type of license(s) you currently hold:

Commercial License A B C CDL

Non-Commercial License A B C

Are you over the age of 18? Yes No

If no, you may be required to provide authorization to work.

If applying to be a sworn police officer, are you over the age of 21? Yes No Not Applicable

Note - The City Participates in E-Verify

Have you ever worked for the City of Hyattsville before? Yes No

If yes, please complete the following:

Job Title: _____

Dates of Employment: _____

Reason for Leaving: _____

Do you have any relatives who work for the City of Hyattsville? Yes No

If yes, who are they and where do they work?

Section III: Military Record

Have you ever served on active duty in the US Military? Yes No

If yes, please indicate branch of service and dates (month/year) of active duty. _____

Section IV: Employment History

List last position first. Include history of employment starting with your present or most recent position. Include all relevant paid, non-paid, volunteer and military experience. List promotions as separate jobs.

Name and Address of Employer	Dates Employed		Salary/Earnings
	From (Month/Year):	To (Month/Year):	Starting: \$ _____ per _____ Ending: \$ _____ per _____
Position Title:			
Name of Immediate Supervisor:			
Telephone Number for Supervisor:			
OK for City to contact this Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason for leaving:			
Description of work:			

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	From (Month/Year):	To (Month/Year):	Starting: \$ _____ per _____ Ending: \$ _____ per _____
Position Title:			
Name of Immediate Supervisor:			
Telephone Number for Supervisor:			
OK for City to contact this Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason for leaving:			
Description of work:			

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	From (Month/Year):	To (Month/Year):	Starting: \$ _____ per _____ Ending: \$ _____ per _____
Position Title:			
Name of Immediate Supervisor:			
Telephone Number for Supervisor:			
OK for City to contact this Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Reason for leaving:			
Description of work:			

** If you need additional space, please continue on a separate piece of paper.*

Section V: Education and Training

High School/GED

Name of High School or Issuer of GED:

Address (City/State):

Graduated? Yes No

Total School Years Completed:

Colleges or Universities

Name of College or University:

Address (City/State):

Graduated? Yes No

Degree Received:

Colleges or Universities

Name of College or University:

Address (City/State):

Graduated? Yes No

Degree Received:

List any certifications, special qualifications, skills or licenses you hold that are relevant to the position for which you are applying, not covered elsewhere in this application:

1. _____
2. _____
3. _____
4. _____

For applicants for Public Safety Positions (Code Enforcement, Public Safety Aide/Dispatcher, Police Officer), in which familiarity with other languages is required/preferred, indicate any foreign languages you speak, read or write:

Language:	Fair	Average	Articulate
Speak			
Read			
Write			

Language:	Fair	Average	Articulate
Speak			
Read			
Write			

Section VI: Organization Memberships

List any professional, trade, business or civic activities and offices held that are relevant to the job for which you are applying. You may exclude memberships that would reveal race, religion, gender, sexual orientation, age, ancestry or national origin, marital status, handicap or disability, status as a veteran or any other protected status.

Section VII: Personal or Business References

List three adults (who are not relatives) who have known you well for at least three years and whom the City may contact for reference information.

Name	Address	Daytime Phone Number	Email Address	Relationship	How Long Known

Section VIII: Applicant's Statement

Have you been terminated for any reason? Yes No

If yes, provide details on a separate sheet of paper and attach.

Have you quit a job after being notified that you would be terminated? Yes No

If yes, provide details on a separate sheet of paper and attach.

Within the last seven (7) years, have you ever been convicted of a felony (include major traffic violations such as Driving Under the Influence or Driving While Intoxicated, etc.?) Yes No

Applicant, please note that a conviction of a felony is not an automatic bar to employment. All circumstances will be considered.

I understand that prior to employment, I may be required to take and pass urinalysis for the presence of illegal controlled substances or drugs or alcohol; produce documentation verifying identity and employment eligibility in the United States; and pass background and reference checks. Yes No

I understand that if I am employed by the City of Hyattsville, I am required to serve a probationary period during which time my job performance will be evaluated; I may be terminated if my conduct or performance is not fully satisfactory; I may be required to maintain a valid State of Maryland driver's license if one is required for the job; I may be subject to urinalysis and/or blood testing for alcohol/substance abuse for reasonable cause or post-accident testing and will be subject to random testing if my job is security- or safety-sensitive. Yes No

I certify that every answer and statement that I have made in this application is true and complete to the best of my knowledge. Yes No

I understand that any false or incomplete answer may be grounds for not employing me or dismissing me after I begin work. Yes No

Consistent attendance and punctuality are essential requirements of every job with the City of Hyattsville. Will you be able to meet the City's requirement for regular attendance and punctuality if you are offered a job with the City? Yes No

This employment application is considered active for a period of ninety (90) days. An applicant who wishes to be considered for employment beyond this time frame should complete another application.

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the City from all liability that might result from making an investigation.

As an applicant for a position with the City of Hyattsville, I understand and agree to all items contained in the Applicant's Statement portion of this employment application. This application must be signed to be considered for any position.

Name (PRINTED)

Signature

Date

Please take a minute to tell us how you heard about the position you are applying for:

- | | |
|---|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> City website |
| <input type="checkbox"/> City newsletter | <input type="checkbox"/> City Employee |
| <input type="checkbox"/> Newspaper advertisement: _____ | |
| <input type="checkbox"/> Other website: _____ | |
| <input type="checkbox"/> Other: _____ | |

It is the policy of the City of Hyattsville to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, gender, sexual orientation, ancestry or national origin, marital status, expunged juvenile records, pregnancy, and political or union affiliation, and to afford equal opportunities to disabled veterans, veterans of the Vietnam era, and individuals with a disability, any and other characteristic protected by Federal, State or Local law.

For City of Hyattsville use only:

Date Received: _____ **Assigned to:** _____
(department)

Date Filled: _____ **Job Posting Closing Date:** _____

Comments:



City of Hyattsville, Maryland

VOLUNTARY EEO SELF-IDENTIFICATION

*Return with your Application for Employment to:
4310 Gallatin Street, Hyattsville MD*

The Equal Employment Opportunity Commission requires organizations with 100 or more employees to complete an EEO-1 report each year. We ask job applicants to complete this voluntary self-identification so that the City can fulfill its reporting requirements.

Completion of this data is voluntary and will not affect your opportunity for employment or terms or conditions of employment. This form will be used for EEO-1 reporting purposes only and will be kept separate from all other personnel records.

Name:	
Position Applied For:	
Date:	

Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
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Race/Ethnicity: Check one box below corresponding to the ethnic group with which you identify.	
<input type="checkbox"/>	Hispanic or Latino A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
<input type="checkbox"/>	White (Not Hispanic or Latino) A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
<input type="checkbox"/>	Black or African American (Not Hispanic or Latino) A person having origins in any of the black racial groups of Africa.
<input type="checkbox"/>	Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.
<input type="checkbox"/>	Asian (Not Hispanic or Latino) A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
<input type="checkbox"/>	American Indian or Alaska Native (Not Hispanic or Latino) A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.
<input type="checkbox"/>	Two or More Races (Not Hispanic or Latino) All persons who identify with more than one of the above five races.

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