

# County Commissioners of Kent County, MD

## Department of Parks and Recreation

11041 Worton Road • P.O. Box 67 • Worton, MD 21678 • Phone 410-778-1948 • Fax 410-778-4602

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### Important Notice to Applicants

Dear Applicant,

Thank you for your interest in becoming employed with the County Commissioners of Kent County, Maryland Department of Parks and Recreation. Attached for your completion is the Kent County Employment Application.

As a condition of consideration for employment, all applicants are required to pass several preliminary background searches (additional background searches and consents to searches will also be required *if* you are offered a position). ***For applicants who are at least 16 years of age, or who will be at least 16 years of age when service starts, your consent is needed for a search of the State of Maryland Child Protective Services (CPS) Centralized Confidential Database*** (applicants under 16 years of age require a parent/guardian consent to the search). The Consent for Release of Information form ***must be completed online*** by visiting the Maryland Department of Human Resources website. Detailed ***instructions on how to access and complete this form are outlined on the next page***. Once the form is completed online, the form must be ***printed and signed in the presence of a Notary Public***.

Additionally, background searches of the Maryland Judiciary Case Search database, as well as the State of Maryland and Federal Bureau of Investigation Child Sex Offender Registries will also be conducted. As the information found within each of these databases is public record, your consent will not be necessary to perform these searches.

Thank you for your interest for employment with Kent County's Department of Parks and Recreation. We look forward to receiving your application for employment and background search consent form.

Sincerely,

*Myra S. Butler*

Myra S. Butler  
Director



*Creating balanced opportunities for our patrons to play, learn, and grow through our programs and parks.*



**State of Maryland Child Protective Services Program**  
**Consent for Release of Information CPS Background Clearance Request**  
**Adam Walsh Background Clearance Request**  
**Instructions**

**\*\*\*The request form must be completed online and then printed\*\*\***

If you do not have access to a computer and/or printer, you may complete and print the form at the Kent County Public Library Worton Computer Facility located at the Kent County Community Center. You will not be charged a fee to print the request form.

1. Access the DHR website at [www.dhr.state.md.us](http://www.dhr.state.md.us)
2. Click the link at the bottom left of the home screen - *CPS/Adam Walsh Background Request Form*
3. Click the link in the last paragraph – *Child Protective Services Background Clearance Form*
4. **Complete Part I-A** Only if you would like to have the results of the search sent to you
5. **Complete Part I-B**
  - Select “Other” and type: **County Commissioners of Kent County, Parks and Recreation**
  - Under Agency/Individual Name type: **Kent County Parks and Recreation**
  - Under Name of Agency Representative type: **Myra S. Butler**
  - Under Agency’s Address type: **11041 Worton Rd, P.O. Box 67, Worton, MD 21678**
  - Under Representative’s Phone Number type: **410-778-1948**
  - Under Representative’s Email type: **mbutler@kentgov.org**
6. **Complete Part II** in its entirety as applicable to the person being searched; If a section is not applicable to the person being searched, leave the section blank
  - Don’t forget to answer the “yes or no” questions about living and volunteering in Maryland in the past; If you answer yes to either question you must also indicate the year(s)
7. **Fully Read Part III** (If the applicant/person being searched is at least 16 years of age, or will be at least 16 years of age when service begins, the applicant/person being searched must read this section; **If the person being searched is under 16 years of age, a parent/guardian must read this section**)
8. **Print the form** (only after reviewing that all sections are complete)
9. **Complete Part IV *in the presence of a Notary Public***; If the applicant/person being searched is at least 16 years of age, or will be at least 16 years of age when service will begin, the applicant/person being searched must complete this section; **If the applicant/person being searched is under 16 years of age, the applicant and a parent/guardian must complete this section which requires both the applicant and parent/guardian signatures and printed names**
  - In addition to signing and dating the form, please also clearly print the name of the person who signs the form (print two names if applicant/person being searched is under 16 years of age)
  - KCPR has a Notary Public on staff that is available by appointment only (please call 410-778-1949) to notarize the form at no cost to you; however, you are free to have the form notarized elsewhere at your own cost. We strongly encourage having the form notarized at KCPR to ensure the form is completed properly and in its entirety. **Incomplete or illegible forms will not be accepted and will result in a delay of processing your application.**
10. **Part V must be completed by a Notary Public** as the final step in completing the form
11. **Submit the notarized form and your application directly to Kent County Parks and Recreation** (by mail to the address on the application or in person at the Kent County Community Center located in Worton, MD)

**PLEASE NOTE:** With the exception of Parts IV and V of the form, ALL sections of the form must be type written, otherwise the form will not be accepted and will be returned for improper completion which will result in a delay in processing your application.



# Employment Application

We consider applications for all positions without regard to age, race, color, religion, marital status, sex, national origin, physical or mental disability, sexual orientation, political affiliation, citizenship status, veteran status, genetic testing, or any other legally protected status. Applicants requiring reasonable accommodation to the application or interview process should promptly notify us.

## Applicant Information

Position(s) Applied for: \_\_\_\_\_

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First Middle*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone (Home): ( ) \_\_\_\_\_ Phone (Cell): ( ) \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Salary \$ \_\_\_\_\_

Have you ever worked for Kent County Government in any of its departments? If yes, when?	YES [ ]	NO [ ]	Do you have any relatives who are employed by Kent County Government in any of its departments? Please specify:	YES [ ]	NO [ ]
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Are you legally eligible to work in the U.S.? (Proof of citizenship or immigration status will be required upon hire).	YES [ ]	NO [ ]	Have you ever been convicted of a felony? A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.	YES [ ]	NO [ ]
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If yes, please explain the crime, date of conviction, facts concerning the crime, and any pertinent rehabilitation you have experienced:

## Education

HIGH SCHOOL: \_\_\_\_\_ Address: \_\_\_\_\_  
Number of years attended: \_\_\_\_\_ Did you graduate? YES [ ] NO [ ] Degree: \_\_\_\_\_

COLLEGE: \_\_\_\_\_ Address: \_\_\_\_\_  
Number of years attended: \_\_\_\_\_ Did you graduate? YES [ ] NO [ ] Degree: \_\_\_\_\_

OTHER: \_\_\_\_\_ Address: \_\_\_\_\_  
Number of years attended: \_\_\_\_\_ Did you graduate? YES [ ] NO [ ] Degree: \_\_\_\_\_

References

Please list three references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_

Previous Employment

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES [ ] NO [ ] If no, why?

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES [ ] NO [ ] If no, why?

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES [ ] NO [ ] If no, why?

Have you ever received any disciplinary action in a prior job, such as warnings, suspensions, probations or dismissals?  
YES [ ] NO [ ]

If yes, please explain:

Have you ever been charged with, disciplined for, or been the subject of an investigation involving sexual harassment or any other form of harassment including, but not limited to, race, age, religion, national origin or disability at a previous job?  
YES [ ] NO [ ]

If yes, please explain the nature of the charge, discipline, and/or investigation, and how the matter was resolved. (A positive response will not necessarily bar employment.)

#### Additional Information/Skills

Please list any additional information that relates to your ability to perform the job for which you have applied - such as licenses, job related skills, equipment or machinery skills, professional memberships, etc.

#### Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_  
If other than honorable, explain:

Disclaimer and Signature

*I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.*

*I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. Should I receive a conditional offer of employment, I understand that my fingerprints will be used to check the criminal history records of the state of Maryland and the FBI and the results will factor into the consideration of my employment with the County Commissioners of Kent County. I authorize review and full disclosure of all my records as part of this application process for consideration of my employment. I authorize all individuals, schools, and firms named herein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.*

*I understand that the Kent County Commissioners follow an "employment at will" policy, in that I or Kent County may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless it is specifically authorized in writing by an authorized executive of the Kent County Commissioners. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.*

*I understand that as part of a conditional offer of employment, I will be required to take a drug screening test.*

*In the event of employment, I agree to abide by all the rules and regulations of the Kent County Commissioners.*

*This application for employment will be considered active for 45 days from the date of receipt.*

Signature: *(if applying on line, this page must be mailed with original signatures.)*

Date:

**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. ANY EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.**

Signature:

Date:



WE ARE AN EQUAL OPPORTUNITY EMPLOYER

12/2/2014