



# HUMANE SOCIETY

## *of Washington County*

13011 Maugansville Road Hagerstown, MD 21740 Phone 301-733-2060

**Application for Employment**  
 We are an Equal Opportunity Employer. We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability or any other protected status or characteristic. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Date of Application: \_\_\_\_\_

Position Desired: \_\_\_\_\_

Days and Hours NOT Available: \_\_\_\_\_

Name: \_\_\_\_\_ Are you 18 years or older? \_\_\_\_\_

Do you go by any other name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Salary Desired: \_\_\_\_\_ How did you hear about this position? \_\_\_\_\_

If you are currently employed, may we contact your employer? \_\_\_\_\_

Have you ever applied or been interviewed here before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Have you ever worked or volunteered for the HSWC before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

**Education**

	School & Location	Years of completion	H.S Diploma Or GED	GPA	Major/ Minor
High School					
College					
Other Training Skills					

Are you legally authorized to work in the United States? \_\_\_\_\_

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B status)? \_\_\_\_\_

**Employment**

<b>Month &amp; Year</b>	<b>Name and address of employer</b>	
Start Date:  End Date:	<hr/> <hr/> <hr/> Were you disciplined (Warning, Suspension, Discharge)?  Account for period between jobs:	Duties:  Job Title: Reason for leaving:  Name of Supervisor:  May we contact company for reference:  Starting rate of pay: Final rate of pay:
Start Date:  End Date:	<hr/> <hr/> <hr/> Were you disciplined (Warning, Suspension, Discharge)?  Account for period between jobs:	Duties:  Job Title: Reason for leaving:  Name of Supervisor:  May we contact company for reference:  Starting rate of pay: Final rate of pay:
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**Professional References-List three people, who are not relatives:**

Name	Knows you from...	Address and/or Phone Number

**Why are you interested in working with the Humane Society of Washington County?**

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This application will be kept on file for 60 days.

After reviewing the job description is there any reason that you feel you can't do this job? \_\_\_\_\_

I certify that all the information submitted by me on this application is true and correct, and I understand that if any false information, omissions, or misrepresentations are discovered, my application will be rejected and if I am employed that my employment will be terminated.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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