2905 Mountain Road · Pasadena · Maryland · 21122 Phone (410) 437-2155 • Fax (410) 437-2593

Application for Employment

Personal Information _____ M.I._____ Last______Suffix_____ Address: ______ State:_____ Zip Code:___ Email :______ Cell Phone Number:______ Employment Desired Date Available to Start: _____ Salary Desired:____ Days and Times you are Available to Work:______ Education _____ Years Attended:______ Did you Graduate?_____ Highest Level of Math Completed at School? ______ If still in school, what Math Class are you in now?___ ______ Years Attended:______ Did you Graduate?___ College:_ College Major____ Employment History (Begin With Most Recent) 1.)Employer: Phone Number: Salary: Position: Reason for Leaving:_____ May we Contact this Employer:_____ Name and Title of Contact Person:___ 2.)Employer:_____ _____ Phone Number:___ Address:__

Continued on Reverse

Start/End Dates: Salary: Position:

May we Contact this Employer:______ Name and Title of Contact Person: ____

Reason for Leaving:_____

1. What qualities, knowle	dge, and/or skills do you have that would make you good at this job?
2. List any vacations, spc	rts, or extracurricular activities you have that will impact your work schedule?
3. If you could pick your o	wn schedule, what hours would you want, and not want to work?
	nd least favorite part about working at previous jobs? If no previous jobs, then what do you least favorite part about working at Kent Island Crab Co?
	ck on the status of your application. But please feel free to stop in to on and speak with a hiring manager Monday-Friday before 5p.m.
	K HOURS FOR THIS JOB ARE ON THE WEEKENDS. IF YOU ARE WORK WEEKENDS, PLEASE DO NOT TURN IN THIS APPLICATION.
I HAVE READ THE ABO	OVE TWO PARAGRAPHS (check box)
Date Completed:	Signature: