

**DORCHESTER COUNTY  
DEPARTMENT OF CORRECTIONS  
NOTICE TO PROSPECTIVE APPLICANATS / EMPLOYEES**

SALARY: Per Current Salary Structure as set by Dorchester County

VACATION: Standard County Vacation Package

SICK LEAVE: 15 days per year, unlimited accumulation

HOLIDAYS: As set by Dorchester County

UNIFORMS: Most uniforms and equipment are provided

HOSPITALIZATION: Dorchester County offered Health Plan

RETIREMENT: Employees are enrolled in the State of Maryland Retirement System

ENROLLMENT: Maryland State Employees Credit Union

FREE MEMBERSHIP: Blood Bank of Delmarva

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

**SELECTION GUIDELINES:**

A formal application, rating of education and experience, oral interview, Skills Ability Test, reference check, credit check, and job related test may be required.

Applicants may be given a Conditional Offer of Employment contingent on the results of a medical and psychological examination to determine their ability to perform job related functions.

**YOU MUST PROVIDE PHOTOCOPIES OF THE FOLLWING DOCUMENT:**

Birth Certificate	Social Security Card	Credit Check
Valid A. B. or C Maryland Drivers License		DD214 for Military Service
High School diploma or GED Certificate		Application Questionnaire

**Failure to submit the above documents will result in the application being rejected.**

**All questions must be answered completely, neatly, legibly, and truthfully, as incomplete applications may not be considered .**

**Page Two**

A brief job description for entry level position is provided. The Position Description does NOT constitute an employment agreement between the employer and employee and is subject to change by the employer as the needs of the employer and requirements of the job change.

If any information requested on the application is found to be false, incomplete, missing or misleading, then the applicant shall not be considered for employment and if hired, the person subject to be terminated.

If additional space is needed to answer a question(s), attach a separate sheet of paper to the application and number your answer(s). Each applicant is hereby advised that the contents of this application are held to be strictly confidential and no information is disseminated to any person except when essential to the conduct of proper facility business or as required or authorized by law.

Applications shall only remain active for a period of one year from the date of submission.

All persons given a Conditional Offer as a Correctional Officer, must attend mandated training, and be in compliance with the rules and regulations as specified by the Maryland Police and Correctional Training Commission.

All persons accepted for employment with the Department of Corrections shall serve at least one year probationary period.

**The minimum standards for selection for the Department of Corrections are:**

at least eighteen years of age;  
citizen of the United States;  
high school diploma or GED certificate;  
acceptable results of a background investigation including, moral character, reputation, emotional stability, criminal records check, driving records check, military records check, credit reports, school reports, personal references, interviews with neighbors, past employers, and fellow employees, acceptable oral interview;  
pass a drug screening test.

**PHYSICAL DEMANDS:**

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job.

The employee must be physically capable of moving about in the Detention Center. Hand-eye coordination is necessary to operate various equipment.

**Page Three**

Specific vision abilities required by this job include close vision, distance vision, color vision, peripheral vision, depth perception, and the ability to adjust focus.

While performing the duties of this job, the employee is frequently required to stand; walk; sit; and talk or hear. The employee is occasionally required to use hands and fingers, handle or feel objects, tools, or controls; reach with hands and arms; climb or balance; stoop, kneel, crouch, or crawl; and taste or smell. The employee must occasionally lift and/or move objects weighting up to 50 pounds.

The employee must occasionally use force to restrain violent persons or defend against physical attack.

[ ] Int.

**WORK ENVIRONMENT:**

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job.

Work is usually performed in the secure portion of the Detention Center.

While performing the duties of this job, the employee is exposed regularly to loud noise, verbal or physical abuse, stressful situations, and threats to his or her well-being or life. The noise level in the work environment is usually moderate.

[ ] Int.

**APPLICATION FOR EMPLOYMENT**

This application is being submitted to apply for the following position.

**CORRECTIONAL OFFICER - as defined by the Md Police and Correctional Training Commission, DDC Position Description**

**SECTION I Personal Identification**

Name \_\_\_\_\_  
first middle last maiden jr,sr

Other names you have used: \_\_\_\_\_

Complete Address: \_\_\_\_\_  
P.O. Box House No. Street or Road

\_\_\_\_\_  
City or Town County State Zip Code

**Page Four**

If you use a P.O. Box, what is your physical street or road number and name?  
\_\_\_\_\_

Social Security No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Race: \_\_\_\_\_  
background check only

Driver License No: \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_

Home telephone No: \_\_\_\_\_

Other numbers where you can be contacted: \_\_\_\_\_

Are you a U.S. Citizen? \_\_\_\_\_ By birth or naturalization? \_\_\_\_\_

**SECTION II Military History**

1. Branch \_\_\_\_\_ Entry Date \_\_\_\_\_ Separated \_\_\_\_\_

2. Type of Discharge / Separation \_\_\_\_\_

3. Are you now a member of a Military Reserve or National Guard Unit? \_\_\_\_\_

4. Military occupational Speciality: \_\_\_\_\_

**SECTION III Background**

1. List all criminal convictions that you have received:

Date	Court	Charge	Sentence
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. Are you pending any civil court action? \_\_\_\_\_ If yes, explain on the work sheet.

3. Are you on probation to any Court? \_\_\_\_\_

4. Have you ever used or gone by a different name, alias, or incorrect name?  
\_\_\_\_\_

5. List your **COMPLETE ADDRESSES** for the past ten (10) years starting with your present address and working backwards

Dates		street and number	city, county, state, zip
from	to		
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

6. Are you presently awaiting criminal or traffic court action? \_\_\_\_\_

7. Are you presently the subject, or a party, of any investigations or pending criminal litigation? \_\_\_\_\_

**SECTION IV Work Notice**

1. How much notice would you require for your present employer, prior to starting work?  
\_\_\_\_\_

2. Are you laid off and subject to being called back to work? \_\_\_\_\_

3. Explain why, you would like the position you have applied for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION V Work History**

1. List your complete work history, starting with your present position and work backwards.

**Include COMPLETE mailing Addresses  
employer's name, address  
and supervisor**

Dates from to duties

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**SECTION VI CO-Workers**

1. List three co-workers

**LIST COMPLETE MAILING ADDRESSES**

NAME COMPLETE ADDRESS  
Street Address, City, Zip Code

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**SECTION VII Education and Skills**

1. List last school year you successfully completed \_\_\_\_\_
2. Did you receive a high school diploma? \_\_\_\_\_
3. Name and Address of high school: \_\_\_\_\_  
\_\_\_\_\_
4. Do you have a G.E.D.? \_\_\_\_\_
5. Have you received a degree or certificate from a college? \_\_\_\_\_ If yes, what type of degree and date: \_\_\_\_\_
6. Give name and address of any special or trade schools you have attended, that are related to your application: \_\_\_\_\_
7. Can you use a typewriter? \_\_\_\_\_ If yes, wpm: \_\_\_\_\_
8. Do you have any experience with firearms? \_\_\_\_\_  
If yes, list type of weapons: \_\_\_\_\_  
\_\_\_\_\_

**SECTION VIII Personal References**

List below the information requested for three personal references who are reliable persons, who you know well enough to give information concerning your background.

**DO NOT INCLUDE RELATIVES OR EMPLOYERS**

1. Name \_\_\_\_\_  
COMPLETE Address \_\_\_\_\_  
\_\_\_\_\_  
Telephone No. \_\_\_\_\_ Years Known \_\_\_\_\_  
Occupation: \_\_\_\_\_

**Personal References**

2. Name \_\_\_\_\_

COMPLETE Address \_\_\_\_\_

\_\_\_\_\_

Telephone No. \_\_\_\_\_ Years Known \_\_\_\_\_

Occupation: \_\_\_\_\_

3. Name \_\_\_\_\_

COMPLETE Address \_\_\_\_\_

\_\_\_\_\_

Telephone No. \_\_\_\_\_ Years Known \_\_\_\_\_

Occupation: \_\_\_\_\_

**SECTION IX      Neighbors**

List below the complete information requested for three neighbors.

1. Name \_\_\_\_\_

Complete address \_\_\_\_\_

2. Name \_\_\_\_\_

Complete address \_\_\_\_\_

3. Name \_\_\_\_\_

Complete address \_\_\_\_\_

**AUTHORIZATION FOR THE RELEASE OF RECORDS AND CONFIDENTIAL INFORMATION**

I authorize complete investigations of all statements contained in this application for employment as may be required. I authorize the Dorchester County Department of Corrections to have access to and receive copies of my school records, college records, court records, driving records, medical records, employment records, credit records, records of treatment for alcohol, drugs, and psychiatric, mental or psychological problems.

I do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself by/to any duly authorized agent of the Dorchester Department of Corrections, whether the said records are public or private, and including those which may be deemed to be of a privileged or confidential nature. The intention of this authorization is to provide information which will be utilized for investigative resource material.

I authorize the full and complete disclosure of the records of educational institutions; military reports and records; financial or credit institutions; the records of commercial or retail mercantile establishments and retail credit agencies; medical and psychiatric consultation and/or treatment, including those hospitals, clinics, private doctors, the U.S. Veterans Administration, and all military and psychiatric facilities; public utility companies; employment and pre-employment records including background investigation reports, the results of polygraph examinations, efficiency ratings, complaints or grievances filed by or against me; records of complaints of a civil nature made by or against me, and including, but not limited to the records and recollections of attorneys at law, or other counsel representing or who have represented myself or another person in any case in which I presently have, or have had an interest.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

_____	_____
Date	Applicant's Signature
_____	_____
date of birth	SS No.                      printed name

STATE OF MARYLAND, COUNTY OF \_\_\_\_\_: to wit,  
On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before a Notary Public, the

undersigned officer, personally appeared \_\_\_\_\_  
known to me ( or satisfactorily proven ) to be the person whose name is subscribed to the  
within instrument and acknowledged that he/she executed the same in the capacity therein  
stated and for the purpose therein contained. In witness whereof, I hereunto set my hand  
and official seal.

_____	_____
place of seal	Signature of Notary Public
	My Commission Expires _____

DORCHESTER COUNTY DEPARTMENT OF CORRECTIONS

Applicant's Full Name: \_\_\_\_\_

Before completing an application for employment with the Department of Corrections, answer the questions below:

Have you received a copy of the position description?  yes  no

Are you a citizen of the United States?  yes  no

Are you at least eighteen years of age?  yes  no

Do you have a valid drivers license?  yes  no

Do you have either a high school diploma or a general education development certificate?  yes  no

Are you willing to work shift work, weekends and holidays?  yes  no

Are you physically and physiologically able to meet the demands for the position(s) that you have applied for?  yes  no

If you have answered NO to any of the above questions, you may not be eligible for employment with the Department of Corrections.

Have you ever been convicted of a felony crime?  yes  no

Have you ever been convicted of any crime in which the possible penalty was confinement in jail or prison for one year or longer?  yes  no

Have you used any type of illegal drug or illegal controlled dangerous substance, within the past three years?  yes  no

Have you ever sold, given, or provided another person with any illegal drug, or illegal controlled dangerous substance?  yes  no

Have you ever illegally used cocaine, heroin, opium, depressants (barbiturates, benzodiazepines, methaqualone, etc.), or stimulants (amphetamines, methamphetamines, etc.), hallucinogenics (LSD, PCP, mescaline, etc.)?  yes  no

Have you ever illegally used cannabis (marijuana, hashish, or any substance containing THC), regularly?  yes  no

If you have answered YES to any of the above questions, you may not be eligible for employment with the Department of Corrections.

APPLICANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Equifax 1-800-685-1111

Experian 1-888-397-3742

Tranunion 1-800-888-4213