



15938 DERWOOD ROAD, ROCKVILLE, MARYLAND 20855-2123

OFFICE: (301) 258-9151 FAX: (301) 330-6023

EMPLOYMENT APPLICATION

PMM is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, veteran status or any disability as provided in the Americans with Disabilities Act.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

PERSONAL INFORMATION

Name _____
LAST FIRST INITIAL

Address _____
STREET CITY STATE ZIP CODE

Telephone _____ Cellular _____ Emergency No. _____

Relationship to applicant _____ Social Security No. _____

What position are you applying for? _____

If you are hired, when can you start work? _____

Type of hours requested: Full-time Part-time Day Night Weekends Flexible

Are there any hours or days you would be unable to work? _____

Are you legally entitled to work in the United States? YES NO

Do you have criminal records that have not been expunged, including driving while under the influence of alcohol and/or drugs? YES NO

(Note: A conviction will not necessarily disqualify you from employment.)

Do you have a valid driver's license? YES NO State _____ License # _____

Do you have a car for daily use? YES NO Are you willing to travel to different locations? YES NO

What is your driving record? (Excellent, Good, Fair) _____ Current number of points _____

EDUCATION

High School: _____ Graduated YES What Year? _____ NO
College: _____ Degree: _____ Years completed _____
Trade School: _____ Courses studied _____

OTHER INFORMATION

Have you ever applied for this company before? YES NO

Have you ever worked for this company before? YES NO

If your answer to either of the above questions is "Yes" state when and where you applied and/or worked _____

How did you learn of our company and/our position? _____

Do you have family members currently employed at PMM? _____ If "Yes" who? _____

All higher level positions with PMM will require a complete background investigation and fingerprinting. Do you have any objections to fulfilling this requirement? YES NO

PREVIOUS EMPLOYMENT

Begin with your most recent employment; give employment history for last 10 years. If you're currently employed, may we contact your employer? YES NO

Contact Name _____ Phone _____

Employer _____

Address _____

Telephone Number _____ Supervisor _____ Your Position _____

Hire Date _____ Termination Date _____ Annual Income _____

Reason for leaving _____

Contact Name _____ Phone _____

Employer _____

Address _____

Telephone Number _____ Supervisor _____ Your Position _____

Hire Date _____ Termination Date _____ Annual Income _____

Reason for leaving _____

Special skills and or comments you would like to acknowledge? Please explain:

PLEASE READ CAREFULLY AND SIGN BELOW:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statement verification of any and all information to perform a criminal background check, driving record check, and to inquire into my character, general reputation, personal characteristics and mode I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application and/or interview(s) may result in my discharge. I also understand that I am required to abide by all rules, regulations, policies and procedures of the employer.

Signature of Applicant

Date