

BACKGROUND SCREENING

Please type or print all answers in ink

SECTION I – APPLICANT INFORMATION

First Name: Middle Name: Last Name:
Current Address: City: State: Zip:
Home Phone: Cell Phone: Email:
Date of Birth: Gender:
Place of Birth (*State or Country*): Citizenship: Race:
Height: Weight: Eye Color: Hair Color:
Rec staff you are working for:

I hereby declare or affirm under Penalty of Perjury, that

I ☐ have ☐ have not been convicted, received a probation before judgment, received a not criminally responsible disposition;
I ☐ am ☐ am not the subject of pending criminal charges; and the information provided above is accurate.

Please return this completed form to Rec.HR@montgomerycountymd.gov or FAX to 240-777-6857.

Background screenings are by appointment only. To make an appointment, please contact HR staff at 240-777-4997 or
Rec.HR@montgomerycountymd.gov

Applicant Signature: _____

Date: _____
