

CAROLINE COUNTY GOVERNMENT  
REQUEST FOR APPOINTMENT CONSIDERATION  
BIOGRAPHICAL INFORMATION FORM

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**CAROLINE COUNTY ETHICS COMMISSION**

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**APPLICANTS: PLEASE NOTE THAT YOU MUST FULLY COMPLETE THIS BIOGRAPHICAL SHEET TO BE CONSIDERED FOR APPOINTMENT.**

Full Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Are you a U.S. Citizen? Yes \_\_\_ No \_\_\_ Are you registered to vote in Caroline County? Yes \_\_\_ No \_\_\_

Political Party: \_\_\_\_\_ How long have you been a County resident? \_\_\_\_\_

Race: \_\_\_\_\_ (optional) Gender: \_\_\_\_\_ (optional)

Home Address: \_\_\_\_\_  
Street City State Zip

Mailing Address: \_\_\_\_\_  
Street City State Zip

Home Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Have you ever been convicted of a violation of any federal, state, or local law, ordinance, or regulation? (Do not include motor vehicle offenses involving a fine of \$200 or less.) No \_\_\_ Yes \_\_\_ (Specify):

Are you currently employed by Caroline County Government or by a local municipal government? No \_\_\_ Yes \_\_\_ (Specify):

Are you currently employed by, or have an ownership interest in, any business, agency, or organization that receives funding (either budgeted, grant, or donation) from Caroline County Government? No \_\_\_ Yes \_\_\_ (Specify):

Are you currently employed by, or have an ownership interest in, any business, agency, or organization that transacts business with Caroline County Government? No \_\_\_ Yes \_\_\_ (Specify):

Do you currently serve on any board, committee, or commission to which the County Commissioners of Caroline County appoint members? No \_\_\_ Yes \_\_\_ (Specify):

Are you an officer or director of, or engaged in lobbying activity for, any organization? No \_\_\_\_\_ Yes \_\_\_\_\_  
(Specify):

Do you hold any elected office, including serving on a political party central committee? No \_\_\_\_\_ Yes \_\_\_\_\_  
(Specify):

Are you related to (including by marriage) any current County elected official, appointed official, or employee?  
No \_\_\_\_\_ Yes \_\_\_\_\_ (Specify):

Occupation, or Previous Occupation if Retired:

Employer:

Work Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_ Name of Immediate Supervisor: \_\_\_\_\_

Please provide one **business** reference:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Please provide two **personal** references:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

**Please attach a separate sheet(s) that details your academic background,  
work experience, and professional, political, and civic affiliations.**

Applicant Certification and Authorization

1. I certify and affirm that I have carefully reviewed all of the information I have supplied in this Biographical Information Form, and that it is true and correct.
2. I authorize Caroline County to solicit information regarding my character, general reputation, previous employment, and similar background information, and to contact any previous employers and references I have listed on this Form. I authorize employers and references provided in this Form to furnish Caroline County with information they may have regarding my character, general reputation, previous employment, and similar background information. In consideration of Caroline County's willingness to consider me for appointment to the Caroline County Ethics Commission and to evaluate my credentials against other applicants, and the willingness of my previous employers and references to supply information which is necessary to that process, I release, discharge, and hold harmless Caroline County from any liability whatsoever in connection with the furnishing or obtaining of employment information, or arising out of the proceedings of this Form and consideration of my candidacy for the position I have applied for.
3. I understand that I may be subject to a criminal background check and authorize Caroline County to perform a criminal background check, including, but not limited to, criminal record review and review of my driving record.
4. I specifically acknowledge that:
  - a. If, during the selection process, any information I have supplied on this Form is found to be incorrect or incomplete, I may be subject to disqualification from further consideration as an applicant for the Caroline County Ethics Commission for furnishing false information.
  - b. If, after I have been appointed to the Caroline County Ethics Commission, any information I have supplied is found to be incorrect or incomplete, I may be removed from the Commission for furnishing false information.
5. I fully understood the provisions of this Applicant Certification and Authorization when I read them, or they were fully explained to me by the Caroline County Commissioners Office.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

**Application checklist:** \_\_\_\_\_ Completed and signed Biographical Information Form, including the additional information requested on page two of the form  
\_\_\_\_\_ Letter of interest

Please mail completed application packets to:

County Commissioners of Caroline County  
Attn: Sara Visintainer  
Courthouse  
109 Market St., Room 123  
Denton, MD 21629