

LOCKSMTH LICENSING PROGRAM

REPORT OF EMPLOYEE

FOR AUTHORIZATION TO PROVIDE LOCKSMITH SERVICES ON BEHALF OF A LICENSED LOCKSMITH BUSINESS

SECTION 1. INSTRUCTIONS FOR APPLICANTS

- 1. The applicant owner/designee and employee must complete this form. All information must be typewritten or clearly printed in ink. Incomplete forms will not be accepted. Mail the completed form to the address shown at the top of the page. Emailed forms are also acceptable.
- 2. The applicant owner/designee must submit a separate form for each prospective employee.
- 3. The applicant owner/designee must submit a passport-sized photo of each prospective employee.
- 4. As an employee of a licensed locksmith business who will be providing locksmith services on behalf of the business, you are required to apply to the Criminal Justice Information System Central Repository (CJIS) for a Federal and State criminal history records check. Upon receipt of the results of the background check, you will be advised whether there are any issues identified that may disqualify you from employment.
- 5. Employee changes must be reported to the Program within 10 days.

SECTION 2. BUSINESS INFORMATION

Applicant Owner/Designee's	Name:		FIRST	MI
Business Name:	LASI		FIKST	IVII
				License Registration #
Trade As or Doing Business if necessary)	As:			5
Fixed Business Address:				
_				
_	City AND County	State		Zip code
Add the following technician	to my license:			
Applicant Owner/Designee's	Signature:			

Dlopllocksmiths-labor@maryland.gov | (410) 230-6159 | www.labor.maryland.gov

SECTION 3. EMPLOYEE'S INFORMATION

Employee's Name:					
1 2	LAST		FIRST	MI	
Home Address:					
	City AND County	State		Zip code	
SECTION 3 (CONTIN	NUED) EMPLOYEE'	S INFORMA	ATION		
Personal Email Address					
Social Security No.	Home Telephone No				
Place of Birth	Date of Birth (MM-DD-YY)				
Driver's License No.	Driver's License State				

SECTION 4 QUESTIONS AND CERTIFICATION (for prospective employee) (Circle Yes or No)

Have you ever been convicted of a felony or misdemeanor in any State, District of Columbia, or Federal court? YES NO

Have you ever had this type of license denied, suspended, or revoked by Maryland, any other state, or the District of Columbia?

If you have answered yes to any of the above questions, you must submit the following with the application:

- A typed or clearly printed letter giving a complete explanation of the incident(s)
- A true test copy of the applicable court document(s)
- A copy of the final order in your case(s)

EMPLOYEE'S AFFIDAVIT

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF. I further authorize the release of any information contained within this application to an authorized representative of the Department of Labor for further investigation; I further certify that I have paid all undisputed taxes and unemployment insurance contributions payable to the Comptroller or the Department of Labor Regulation or have provided for payment in a manner satisfactory to the unit responsible for collection.

Signature of Prospective
Employee

Date Signed _____

SECTION 5 ADDITIONAL INSTRUCTIONS AND INFORMATION

Digital fingerprint services ARE NO LONGER available at the offices of the Department of Labor. Digital fingerprint service locations are available through the CJIS CENTRAL REPOSITORY. Go to the website <u>http://dpscs.state.md.us</u> to find a location closest to you (search under "Find a Service," to find both "Fingerprinting" and "Background Checks").

PLEASE NOTE: This Report of Employee Form will be retained on file with the Department of Labor. After the Department of Labor receives and reviews both the Federal and State criminal history records reports, your employer will be notified of your eligibility for employment pursuant to Section 12.5-203 Business Regulation Article, Annotated Code of Maryland.

MARYLAND LOCKSMITH LICENSING PROGRAM 100 South Charles Street, Tower 1 Baltimore, Maryland 21201 Phone: 410-230-6159 Email: DLOPLLocksmiths-labor@maryland.gov

OFFICE USE ONLY				
APPROVED:				
DENIED:				
DATE:				

Please secure passport sized photo here.