

## SECURITY GUARD EMPLOYMENT APPLICATION

Before completing the Employment Application, please read the attached Employment Requirements to ensure that you are qualified and meet the necessary criteria for the position.

### APPLICANT INFORMATION (Please print)

<b>Date of Application:</b>	
<b>Full Legal Name:</b>	
<b>Any Other Names Known By:</b>	
<b>Residence Address:</b>	
<b>City / State (Prov) / Zip (Postal):</b>	
<b>Cell Phone:</b>	
<b>Residence Phone:</b>	
<b>Social Security (Social Insurance) No.:</b>	
<b>Position Applying For:</b>	
<b>Availability:</b>	Daytime Days: _____ AM to ___ PM Evenings Days: _____ AM to ___ PM Overnight Days: _____ AM to ___ PM

### EMPLOYMENT HISTORY

<p><b>Employment Record for the past ___ years (starting with the current or most recent employer). For each position, provide the following:</b></p> <ul style="list-style-type: none"> <li>• start date and end date</li> <li>• name of company</li> <li>• position held</li> <li>• brief job description</li> <li>• contact name &amp; phone number</li> <li>• reason for leaving</li> </ul>	
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<p><b>Previous experience in security services (Give names, phone nos. of employers, and dates of employment for all positions. Indicate whether full-time or part time.)</b></p>	
<p><b>Have you ever applied to or worked for [NAME OF SECURITY FIRM] before?</b></p>	<p>____ Yes    ____ No If yes, give date(s) _____</p>
<p><b>Do you know anyone who currently works for [NAME OF SECURITY FIRM]?</b></p>	<p>____ Yes    ____ No If yes, state name and relationship of each person:</p>
<p><b>Why are you making this application to work for [NAME OF SECURITY FIRM]?</b></p>	

**THIS IS A 6-PAGE FORM.**