EMPLOYMENT APPLICATION

We are an equal opportunity employer and comply with all federal, state and local laws regarding employment practices. All information requested on this application is intended to be job related and will not be used in any unlawful discriminatory manner. We are committed to making reasonable accommodations for qualified persons with disabilities. Please take your time to fill this application. Our loyal business is your business.

Position applying for:				
Expected Salary: \$	Please circle one.			
Are you interested in: Full Time Part Time	Special Events Only Other			
Have you applied with us before? Yes No	or Temporary			
If Yes, when?				
Have you ever worked for us before? Yes No If Yes, list which company, location and employment da	ites.			
* First Name:	DATA Are you 18? ☐ Yes☐ No			
* Middle Name:	Please state your age?			
* Last Name:				
* Birthday:				
* SSN:				
* Present Address:				
City:				
State:				
Zip:				
Telephone Number: () -				
Work Telephone: () -				
Email:				

May we contact you at work? ☐ Yes ☐ No

		EDUCA	TION	
High School Name and Address of School	Major	No. of Yrs	GPA	Diploma or G.E.D.
College or Vocational School	Major	No. of Yrs	GPA	Degree/ Certificate
	14/	ODK EXE	AEDIENCE	
	<u>vv (</u>	(Current emp	PERIENCE ployer first)	
** Company:				
Address:				
Telephone:				
Hired Date:				
Starting Pay:				
Ending Pay:				
* Your Title: Duties:				
* Supervisor's Name: Phone Number:				
* May we contact this work? [∃Yes⊟ N			
* If No, why not?		O .		
2) Company:				
Address:				
Telephone:				
Hired Date:				
Ending Date:				
Starting Pay:				
Ending Pay:				
* Your Title: Duties: * Supervisor's Name:				
Supervisor s riarrie.				
Phone Number				=
Phone Number:* * Reason for leaving?				

(3) Company:	
Address:	
Telephone:	
Hired Date:	
Ending Date:	
Starting Pay:	
Ending Pay:	
* Your Title: Duties:	
* Supervisor's Name:	
Phone Number:	
* Reason for leaving?	
May we contact this work? ☐Yes ☐No	
* If No, why not?	
, ,	
(4) Company:	
Address:	
Telephone:	
Hired Date:	
Ending Date:	
Starting Pay:	
Ending Pay:	
* Your Title: Duties:	
* Supervisor's Name:	
Phone Number:	
Phone Number:* Reason for leaving?	
May we contact this work? Yes No	
* If No, why not?	
ii ivo, wily not:	
(5) Company:	
Address:	
Telenhone:	
Telephone:Hired Date:	
Ending Date:	
Starting Pay:	
Ending Pay:	
* Your Title: Duties:	
* Supervisor's Name:Phone Number:	
	
* Reason for leaving?	
May we contact this work? ☐Yes ☐No	
* If No, why not?	

REFERENCES

(1) Name:		
Address:		
Phone: () -	
(2) Name:		
Address:		
Phone: () -	
	· 	
Address:		
Phone: () -	
`	<u>SKILLS</u>	
	iny special skills, knowledge, talents, business licenses or other job related experie elsewhere do you have that will help with our decision to hire you as one of our	ences
CRIMINAL H	HISTORY	
	ver been adjudicated or convicted of a crime as an adult?	
_	☐Yes ☐ No	
If Yes, please	se state what the crime was?	
	ver been adjudicated or convicted of a crime as a juvenile?	
_	☐Yes ☐ No se state what the crime was?	
ATTENTION	ON: THIS STATEMENT MUST BE SIGNED; ANY FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY L Read the following statements carefully before you sign this application.	μ AW .
application, including current (unless note	e Star Security, Inc. and any agent acting on its behalf to conduct an inquiry into any job-related information conta ling, but not limited to, my records maintained by an educational institution relating to academic performance. I hereby a oted otherwise on the reverse side of form) and previous employers to release any information in their files pertainly, including, but not limited to, the nature of my employment, wages, attendance records, performance reviews and	authorize all ining to my

I hereby authorize Star Security, Inc. and any agent acting on its behalf to conduct an inquiry into any job-related information.

I certify that all of the statements by me in this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that any false information or omission of information from this application may be cause for rejection, or dismissal if employed. I have read the NOTICE TO APPLICANTS and agree to supply the information on this form with full knowledge of the meaning of that NOTICE.

SIGNATURE OF APPLICANT: _____ DATE: ____