|  |  |  |
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|  | |  | | --- | | SECURITY OF AMERICA | |
|  |

# Employment Application

## APPLICANT INFORMATION

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  | Last | First | M.I. |  |  |

|  |  |  |
| --- | --- | --- |
| Address: |  |  |
|  | Street Address | Apartment/Unit # |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | City | State | ZIP Code |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone: |  | Email |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date Available: |  | Social Security No.: |  | Desired Salary: | $ |

|  |  |
| --- | --- |
| Position Applied for: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Are you a citizen of the United States? | YES | NO | If no, are you authorized to work in the U.S.? | YES | NO |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Have you ever worked for this company? | YES | NO | If yes, when? |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Have you ever been convicted of a felony? | YES | NO |  |

|  |  |
| --- | --- |
| If yes, explain: |  |

## EDUCATION

|  |  |  |  |
| --- | --- | --- | --- |
| High School: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Diploma: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| College: |  | Address: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES | NO | Degree: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Other: |  | Address: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Did you graduate? | YES |  | NO | Degree: |  |
|  |  |  |  |  |  |  |  |  |  |

## PREVIOUS EMPLOYMENT

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES | NO |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES | NO |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |

|  |  |
| --- | --- |
| Responsibilities: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| From: |  | To: |  | Reason for Leaving: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| May we contact your previous supervisor for a reference? | YES | NO |  |

## MILITARY SERVICE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Branch: |  | From: |  | To: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Rank at Discharge: |  | Type of Discharge: |  |

|  |  |
| --- | --- |
| If other than honorable, explain: |  |
|  |  |
|  |  |

## EMPLOYMENT QUESTIONNAIRE

|  |  |
| --- | --- |
| Are you at least 18 years of age? | Yes\_\_\_\_ No\_\_\_\_ |
| Have you ever worked in the Security Industry? If so, please describe previous duties and responsibilities. | Yes\_\_\_\_ No\_\_\_\_  Responsibilities: |
| Have you previously applied with Security of America? | Yes\_\_\_\_ No\_\_\_\_ |
| What is the best time to contact you? | \_\_\_\_\_\_\_\_\_\_\_ AM/PM |
| Do you have friends or relatives who currently work for Security of America? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you willing to work on-call? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you willing to work overtime? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you willing to work varying assignments to include night shifts? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you able to work weekends and holidays? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you have a telephone of your own? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you have reliable transportation to and from assignments? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you work well in a structured environment? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you able to work as a member of a team? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you work well with others? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you able to work with the public? | Yes\_\_\_\_ No\_\_\_\_ |
| Can you read and write fluently in English? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you able to work alone and unsupervised? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you need to be supervised to perform assigned tasks? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you a self-starter? | Yes\_\_\_\_ No\_\_\_\_ |
| Are you a problem solver? Are you able to improvise | Yes\_\_\_\_ No\_\_\_\_ |
| Do you need to be supervised to perform an assigned task? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you consider yourself motivated? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you like working in different environments? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you have a Guard License? | Yes\_\_\_\_ No\_\_\_\_ |
| Do you have any specialized training? If so, please list the type of training. | Yes\_\_\_\_ No\_\_\_\_  List Training:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you have any apprenticeships skills, and/or participate in extra-curricular activities? | Yes\_\_\_\_ No\_\_\_\_  Please list skills and/or activities:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

## SPECIALIZED SKILLS (check all that apply)

|  |  |
| --- | --- |
| Computer Skills (Pc Or Mac) |  |
| Word Processing |  |
| Typewriter |  |
| Alarm Systems |  |
| Electronics Equipment |  |
| Law Enforcement Training |  |
| Sexual Harassment Training |  |
| Cultural Diversity Training |  |

## SECURITY SPECIALIZED TRAINING (check all that apply)

|  |  |
| --- | --- |
| Defensive Tactics |  |
| Verbal Tactics |  |
| Report Writing |  |
| Security Law |  |
| Firearms Training |  |
| Use of Force Training |  |
| Private Investigator |  |
| Loss Prevention Officer |  |
| Certified Protective Officer |  |
| Certified Security Supervisor |  |
| Certified Financial Security Officer |  |
| Certified Protection Specialist |  |
| Certified Protection Professional |  |
| Washington State Certified Trainer |  |
| Washington State Certified Firearms Trainer |  |
| Oleo Resin Capsicum Disseminator |  |

## CRIMINAL HISTORY – Section 1

## (Please take a moment to complete this mandatory section)

**IMPORTANT NOTE: ALL APPLICANTS WILL UNDERGO A CRIMINAL BACKGROUND CHECK; THE OFFER OF EMPLOYMENT IS CONTIGENT UPON PASSING SAID BACKGROUND CHECK AS WELL AS THE ISSUANCE BY THE STATE OF WASHINGTON, OF A GUARD LICENSE. IF YOU FALSIFY ANY INFORMATION, THIS IS GROUNDS FOR TERMINATION.**

|  |  |
| --- | --- |
| Have you ever been convicted of a felony?  If yes, please complete **SECTION 2** | Yes \_\_\_\_ No­­­­­­\_\_\_\_ |
|  |  |
| Have you ever been convicted of a gross misdemeanor?  If so, please complete **SECTION 2** | Yes \_\_\_\_ No­­­­­­\_\_\_\_ |
|  |  |
| Are you a fugitive from any jurisdiction in the United States? | Yes \_\_\_\_ No­­­­­­\_\_\_\_ |
|  |  |
| Are you a registered **Sex Offender?** | Yes \_\_\_\_ No­­­­­­\_\_\_\_ |
|  |  |
| Have you ever been convicted of a crime involving theft, fraud, misrepresentation, dishonesty, criminal impersonation of Police Officer, or immoral or unethical behavior? | Yes \_\_\_\_ No­­­­­­\_\_\_\_ |

## CRIMINAL HISTORY – Section 2

## (This section to be completed if you checked yes to any of the above questions in Section 1)

|  |  |  |
| --- | --- | --- |
| **Type of Offense** | **Date of Conviction** | **Disposition** |
|  |  |  |
|  |  |  |
|  |  |  |
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## PHYSICAL ABILITY

## (This section is solely for individuals applying to an Officer position)

### The information received from any candidate/individual is considered confidential and is for the sole purpose and expressed use of **Security of America.** This section outlines certain requirements that must be met for the safety of employees and clients. The answers provided in this section will be used to determine eligibility for certain duty assignments and **not to discriminate.**

|  |  |
| --- | --- |
| Are you able to stand for an extended period of time (up to 8 hours or longer)? | Yes\_\_\_\_\_ No\_\_\_\_\_ |
| Can you work in hostile environments such as rain, cold weather, hot weather, snow, smog, wind, or any combination of these? | Yes \_\_\_\_\_ No \_\_\_\_\_ |
| Are you able to lift and carry at least 100lbs? | Yes \_\_\_\_\_ No \_\_\_\_\_ |
| Are you able to walk up and down stairs? | Yes \_\_\_\_\_ No \_\_\_\_\_ |
| Are you able to ascend and descend ladders? | Yes \_\_\_\_\_ No \_\_\_\_\_ |
| Do you have any pre-existing medical or physical condition that would prohibit you from performing any required assignments? If yes, please explain below. | Yes \_\_\_\_\_ No \_\_\_\_\_ |

|  |
| --- |
|  |
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|  |

**NOTE TO APPLICANTS**: **DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED OF THE REQUIREMENTS FOR THE POSITION TO WHICH YOU ARE APPLYING**.

Are you capable of performing in a reasonable manner with or without reasonable accommodation the duties and responsibilities listed in the job description? Yes No

Applicant hereby acknowledges receipt of the duties/activities/responsibilities of the position to which they applied.

|  |  |
| --- | --- |
| Signed | Date |

## DRUG TESTING POLICY

**Security of America has a ZERO tolerance policy concerning the use of illegal drugs. It is the policy of Security of America that all employees take random urinalysis drug tests as a condition of employment. Employees who refuse to take a drug test are subject to termination. Employees who test with positive results are subject to discipline and possible termination. By signing this statement, you are consenting to random drug testing including pre-employment screening. I have read this policy and agree to take the required random test for drugs as a condition of employment.**

|  |  |
| --- | --- |
| Signature of Applicant | Date |

## INTERESTS AND HOBBIES (Optional)

## (Please take a minute to tell us about yourself and what you like)

|  |  |
| --- | --- |
|  |  |
|  |  |
|  |  |

## REFERENCES

Please list three professional references.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  |  |  |

## DISCLAIMER AND SIGNATURE

I certify that my answers are true and correct to the best of my knowledge. I understand that should this application lease to employment with Security of America, any false or misleading information provided on my application or in my interview are grounds for disqualification and/or termination. I further authorize Security of America and its agents to investigate all information and statements contained in this application for employment.

This application for employment shall be considered active for a period of **not more than sixty days** from the day of submission to Security of America.

I further understand and acknowledge that, unless defined by applicable laws, any employment relationship with Security of America is of an “At-Will” nature, which means that the I, the Employee, may resign at any tine and that you, the Employer, may discharge me as Employee at any time with or without cause. It is further understood that this “At-Will” employment relationship may not be changed by any written document or by any conduct unless such change is specifically acknowledged in writing and authorized by an executive of Security of America. Lastly, it is further understood that I am required to abide by all rules and regulations implemented by Security of America.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Signature: |  | Date: |  |  |

## INTERVIEW NOTES

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| --- |
|  |
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|  |
| **EMPLOYMENT AUTHORIZED - Date Effective/Date of Hire \_\_\_\_**  **EMPLOYMENT DENIED - Date of Denial**  **RE-INTERVIEW – Date of Re-Interview**  \_\_\_\_\_\_\_\_\_\_  Signature of Interviewer      \_\_\_  Human Resources Manager |