

Employment Application  
Advanced Security Services Inc.  
95 Plaistow Road  
Plaistow, NH 03865  
PH: 603-382-1300  
FX: 603-382-0030

[info@advancedsecurityservices.net](mailto:info@advancedsecurityservices.net)

## Personal Information

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_ Last Name: \_\_\_\_\_

Present Address (NO P.O. Boxes)

Street No. & Name: \_\_\_\_\_ Apt# (if any): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone w/area code: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

Pager: \_\_\_\_\_ Are you 18 years or older? Yes No

Are you either a U.S. Citizen or Alien authorized to work in the U.S.? Yes No

In case of emergency notify: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ Phone: \_\_\_\_\_

## Desired Employment

Position \_\_\_\_\_

Date you can start? \_\_\_\_\_ Salary Desired? \_\_\_\_\_

Are you currently employed? Yes No

If yes, may we contact your current employer? Yes No

Have you ever applied to this company before? Yes No

If yes, when? \_\_\_\_\_

Have you ever worked for this company before? Yes No

Name of your last supervisor with this company? \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

How were you referred to this company?  Employment Agency  State Employment Agency  Newspaper Ad  College Placement Service  Friend  Walk In  Other

**Please List your last (3) Three Employers**

Name of Present or Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_ Job Title: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

May we contact your supervisor? Yes  No  Name of Supervisor: \_\_\_\_\_

Supervisor Contact Number: \_\_\_\_\_ Description of work: \_\_\_\_\_

Reason for leaving:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Present or Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_ Job Title: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

May we contact your supervisor? Yes  No  Name of Supervisor: \_\_\_\_\_

Supervisor Contact Number: \_\_\_\_\_ Description of work: \_\_\_\_\_

Reason for leaving:

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Name of Present or Last Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_ Job Title: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

May we contact your supervisor? Yes  No  Name of Supervisor: \_\_\_\_\_

Supervisor Contact Number: \_\_\_\_\_ Description of work: \_\_\_\_\_

Reason for leaving:

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**Education**

High School \_\_\_\_\_

Address

\_\_\_\_\_

# Yrs. Attended? \_\_\_\_\_ Did you Graduate? Yes  No Year Graduated? \_\_\_\_\_

Subjects Studied

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College \_\_\_\_\_

Address

\_\_\_\_\_

# Yrs. Attended? \_\_\_\_\_ Did you Graduate? Yes  No Year Graduated? \_\_\_\_\_

Subjects Studied

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Trade/Business \_\_\_\_\_

Address \_\_\_\_\_

# Yrs. Attended? \_\_\_\_\_ Did you Graduate? Yes  No Year Graduated? \_\_\_\_\_

Subjects Studied

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Other \_\_\_\_\_

Address

\_\_\_\_\_

# Yrs. Attended? \_\_\_\_\_ Did you Graduate? Yes  No  Year Graduated? \_\_\_\_\_

Subjects Studied

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**General**

Subjects of Study or Research Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special Training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Special Skills: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Service Record: \_\_\_\_\_

\_\_\_\_\_

Branch of Service: \_\_\_\_\_ Discharge Rank: \_\_\_\_\_

Present Membership in National Guard Services: \_\_\_\_\_

Date Obligation Ends: \_\_\_\_\_

**References**

Please give the names of three (3) persons you are not related to, whom you have known at least one (1) year:

Reference Name: \_\_\_\_\_

Reference Address: \_\_\_\_\_ Reference Phone \_\_\_\_\_

#: Years Acquainted: \_\_\_\_\_

Reference Name: \_\_\_\_\_

Reference Address: \_\_\_\_\_ Reference Phone \_\_\_\_\_

#: Years Acquainted: \_\_\_\_\_

Reference Name: \_\_\_\_\_

Reference Address: \_\_\_\_\_ Reference Phone \_\_\_\_\_

#: Years Acquainted: \_\_\_\_\_

**Special Questions**

Do you have any physical limitations that preclude you from performing any work which you are being considered? Yes  No

If yes, what can be done to accomodate your limitations? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been arrested for any reason? Yes  No  If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been summoned to appear in court? Yes  No  If yes, please explain:

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Have you ever been convicted of a felony or misdemeanor? Yes  No  If yes, please explain:

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Do you have a valid state issued pistol permit? Yes  No  If yes, which state issued the permit: \_\_\_\_\_ What is the License Number: \_\_\_\_\_

Do you have a state issued Armed Guard License: Yes  No  If yes, what state issued the license? \_\_\_\_\_

**Authorization**

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigations of all statements contained herein and the references listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release all parties from their liability for any damage that may result from furnishing the same to you."

I, \_\_\_\_\_, so hereby authorize Advanced Security Services and Investigations Inc., and/ or it's agent to obtain/review information contained in documents pertaining to my employment with your organization, and what is contained in this application concerning the following:

- \*Criminal History   \*Motor Vehicle Driver History   \*Motor Vehicle License Check
- \*Credit Reports   \*Educational Backgrounds   \* Medical Records
- \*Military History   \*Organization Entry Date: \_\_\_\_\_

I understand and agree that, if hired, my employment is for no definite period and may, regardless of date of payment of my wages and salary, be terminated at any time without prior notice. This information is to be used in determining my eligibility as a candidate for a position with Advanced Security Services Inc.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_