

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

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:

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:

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 for? 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:

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

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: _____