



VALLEY METRO SECURITY

Employment Application

APPLICANT INFORMATION										
Last Name					First				M.I.	Date
Street Address							Apartment/Unit #			
City					State				ZIP	
Phone					E-mail Address					
Date Available					Desired Salary					
Position Applied for										
How Many Hours Can You Work Weekly:				Full Time <input type="checkbox"/>		Part Time <input type="checkbox"/>		Full Or Part Time <input type="checkbox"/>		
Are you a citizen of the United States?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>		NO <input type="checkbox"/>
How Did You Hear About Us?		Newspaper		Phone Book		Referred By:				
Have you ever worked for this company?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?				
Have you ever been convicted of a felony?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain				
Place of Birth:					Date Of Birth:					
Social Security No.					Eye Color:					
Height:		Weight:				Hair Color:				
Days/Hours Available To Work										
No Preference				Thursday						
Monday				Friday						
Tuesday				Saturday						
Wednesday				Sunday						
Do You Have A Driver's License? Yes <input type="checkbox"/> No <input type="checkbox"/> Drivers License Number:										
Have You Had Any Accidents During The Past Three Years?							How Many?			
Have You Had Any Moving Violations During The Past Three Years?							How Many?			

EDUCATION									
High School									
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
College									
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		
Other									
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree		

REFERENCES

Please list three professional references.

Full Name		Relationship	
Company		Phone	()
Address			
Full Name		Relationship	
Company		Phone	()
Address			
Full Name		Relationship	
Company		Phone	()
Address			

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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>
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 <input type="checkbox"/>	NO <input type="checkbox"/>

MILITARY SERVICE

Branch		From		To	
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Rank at Discharge		Type of Discharge	
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If other than honorable, explain	
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Use The Space Below To Summarize Any Additional Information Necessary To Describe Your Full Qualifications For The Specific Position For Which You Are Applying.

DISCLAIMER AND SIGNATURE

"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 of dismissal.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Valley Metro Security permission to contact schools, previous employers, references , and others, and hereby release Valley Metro Security from any liability as a result of such contract.

I also understand and agree that no representative of the company has any authority into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Signature		Date	
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This company is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure that your opportunity for employment with this company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.