



PREMIER SECURITY SERVICES
Security Solutions for

APPLICATION FOR EMPLOYMENT

Pre- Employment Questionnaire- Equal Opportunity Employer

Personal Information			
Name:			
Present Address:	City:	State:	Zip Code:
Permanent Address:	City:	State:	Zip Code:
Home Number:	Referred By: (Please specify which newspaper, person, or internet contact)		
Cellular Number:			

Employment Desired	
Position Desired:	Salary Desired:
Are you currently employed? Yes _____ No _____	If so, may we inquire of your present employer? Yes _____ No _____ Employer's Name and Contact Number
Have you ever applied to this company before?	If so, When?

Academic Profile			
Name and Location of School	Years Attended	Graduation Date	Course of Study
High School			
College			
Trade School			

Are You SORA Certified? _____

If so, ID Number _____

Availability							
Shifts are generally divided into three sections: 1 st (0700- 1500hrs), 2 nd (1500- 2300hrs), and 3 rd (2300- 0700hrs). These hours may vary slightly in accordance to your site specifications. Please notate each section that you are available to work.							
If you are available anytime, please check here							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1 st Shift							
2 nd Shift							
3 rd Shift							

Professional Profile				
Date (Month & Year)	Name and Address of Employer	Salary	Position	Reason for Leaving

All employees are required to pass a background check. Have you, while over the age of 18, ever been convicted of a felony? _____

If so, please explain in full detail in the space provided.

Do you have a valid Driver's License? _____ Do you own a vehicle? _____
DL Number, issuing state, and expiration date

Are you 21 years of age or older? _____

Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understanding that, if employed, falsified statements on this application shall be grounds for dismissal. I also understand and agree that no representative of Premier Security Services has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative."

(Note: Company complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

Date _____

Signature _____