

Address: _____
Number Street City State Zip

Phone Number: (____) _____ Start Date: ____/____/____ End Date: ____/____/____

Reason for leaving: _____ Beginning salary _____ Ending salary _____

Company Name _____ Job Title: _____

Address: _____
Number Street City State Zip

Phone Number: (____) _____ Start Date: ____/____/____ End Date: ____/____/____

Reason for leaving: _____ Beginning salary _____ Ending salary _____

Company Name _____ Job Title: _____

Address: _____
Number Street City State Zip

Phone Number: (____) _____ Start Date: ____/____/____ End Date: ____/____/____

Reason for leaving: _____ Beginning salary _____ Ending salary _____

May we contact your former employers to verify this information? Yes No

May we contact your present employer? Yes No

Have you worked for 1st Class Security before? Yes No

If Yes, From: To:

Reason for leaving:

Former supervisor(s):

CRIMINAL BACKGROUND INVESTIGATION AUTHORIZATION

I do hereby certify that I have never been convicted of any criminal offense anywhere in the United States, except for the following: (Convictions listed does not automatically bar candidate from job sought, decision will be based on job being sought and the time, nature and seriousness of the conviction and related rehabilitations.)

Charge	City, State	Date	Disposition

Personal References

Do not use relatives or previous employers

Providing this information means that you are giving 1st Class Security permission to contact all the references

Name	Address	Telephone
1		
2		
3		

I authorize the investigation of all statements contained in the application. I understand that omission or misrepresentation of facts is cause for dismissal.

Signature: _____

Date: _____

Self Identification Survey

1st Class Security is an equal employment opportunity and affirmative action employer that does not unlawfully discriminate on the basis of race, religion, sex, color, age, national origin, disability, veteran status, or any other status protected by applicable law.

To help us comply with government reporting and other requirements please complete this Survey. All completed Surveys are kept in a confidential file, are not part of your application file, and will only be used in accordance with the provisions of applicable federal law. The completion of this Survey is optional, and the inclusion or exclusion of any information on this form will not affect your employment opportunities with the company. Thank you in advance for your assistance.

Name: _____

Gender: Male Female

Ethnicity (select one):

Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

Not Hispanic or Latino

Race (select all that apply):

White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) – A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races.

Veteran Status

1) Are you a Disabled Veteran? Yes No

2) Are you a Veteran of the Vietnam Era? Yes No

3) Other Eligible Veteran? Yes No

*Please detach and forward to Human Resources