



TRUE BLUE SECURITY SERVICES, LLC

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

| | | | |
|--|----------------------------|----------------------|--|
| | | | DATE |
| | | | <input type="text"/> |
| NAME LAST | FIRST | MIDDLE | SOCIAL SECURITY NUMBER |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| PRESENT HOME ADDRESS (STREET, CITY, STATE, ZIP) | | | |
| <input type="text"/> | | | |
| PERMANENT HOME ADDRESS (STREET, CITY, STATE, ZIP) | | | |
| <input type="text"/> | | | |
| PHONE NUMBER | | | |
| <input type="text"/> | ARE YOU 18 YEARS OR OLDER? | | <input type="radio"/> YES <input type="radio"/> NO |
| ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? | | | <input type="radio"/> YES <input type="radio"/> NO |

EMPLOYMENT DESIRED

| | | |
|---|--|----------------------|
| POSITION | DATE YOU CAN START | SALARY DESIRED |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| ARE YOU EMPLOYED NOW? | IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? | |
| <input type="text"/> | <input type="text"/> | |
| HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? | WHERE? | WHEN? |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| REFERRED BY | | |
| <input type="text"/> | | |

EDUCATION

HIGH SCHOOL

NAME AND LOCATION OF SCHOOL

NO OF YEARS ATTENDED

DID YOU GRADUATE?

SUBJECTS STUDIED

COLLEGE

NAME AND LOCATION OF SCHOOL

NO OF YEARS ATTENDED

DID YOU GRADUATE?

SUBJECTS STUDIED

TRADE SCHOOL

NAME AND LOCATION OF SCHOOL

NO OF YEARS ATTENDED

DID YOU GRADUATE?

SUBJECTS STUDIED

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

SPECIAL SKILLS

ACTIVITIES: (CIVIC ATHLETIC ETC.)

EXCLUDE ORGANIZATIONS. THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS.

U.S MILITARY OR NAVAL SERVICE RANK

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)

FROM TO NAME AND ADDRESS OF EMPLOYER SALARY POSITION REASON FOR LEAVING

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FROM TO NAME AND ADDRESS OF EMPLOYER SALARY POSITION REASON FOR LEAVING

WHICH OF THESE JOBS DID YOU LIKE BEST?

WHAT DID YOU LIKE MOST ABOUT THE JOB?

REFERENCES: GIVE THE NAME OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOW AT LEAST ONE YEAR.

NAME ADDRESS BUSINESS YEARS ACQUAINTED

NAME ADDRESS BUSINESS YEARS ACQUAINTED

NAME ADDRESS BUSINESS YEARS ACQUAINTED

The following statement applies in: **Maryland & MASSACHUSETTS.** (Fill in name of state.)

IT IS UNLAWFUL IN THE STATE OF _____ TO REQUIRED OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYMENT WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

SIGNATURE OF APPLICANT

NAME

ADDRESS

PHONE NUMBER

IN CASE OF EMERGENCY NOTIFY

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETED, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY:

DATE

REMARKS

NEATNESS

ABILITY

HIRED

YES

NO

POSITION

DEPARTMENT

SALARY/WAGE

DATE REPORTING TO WORK

APPROVED

EMPLOYMENT MANAGER

DEPT. HEAD

GENERAL MANAGER