

## **Employment Application** Personal Information Full Name: Last First МІ SSN Date of Birth Address: Street Address Apartment/Unit# City State Zip Code Phone Number Email Address Desired Salary: Position Applied for and Date Available: Are you a U.S. Citizen? Yes If no, are you authorized to work in the U.S.? Yes No Have you ever applied for a license or registration with the following: The NC Private Protective Services Board? Yes No If yes, when: The NC Alarm Systems Licensing Board? No If yes, when: Have you ever been convicted of a felony or misdemeanor? If yes, explain: Education High School: Address: To: Did you graduate? No From: Yes Degree: College: Address: From: Did you graduate? Degree: To: Yes No Address: Other: From: Did you graduate? Yes Degree: To: No References Please list three professional references. Full Name: Relationship: Company: Phone: Address: Full Name: Relationship: Company: Phone: Address:

Relationship:

Phone:

Full Name:

Company:

Address:



## **Employment Application**

Previous Employment (Must Be Completely Filled Out- See Resume Unacceptable)
Please attach a separate sheet if more space is needed.

Company:				Pnone:	
Address:		Supervisor:			
Job Title:		Starting Salary:	Ending Salary:		
Responsibilities:					
From:	То:	Reason for leaving:			
May we contact	Yes	No			
Company:				Phone:	
Address:			Supervisor:		
Job Title:		Starting Salary:	Ending Salary:		
Responsibilities:					
From:	To:	Reason for leaving:			
May we contact	Yes	No			
Company:				Phone:	
Address:			Supervisor	:	
Job Title:		Starting Salary:	Ending Salary:		
Responsibilities:					
From:	То:	Reason for leaving:			
May we contact your previous supervisor for a reference?			Yes	No	
Company:				Phone:	
Address:			Supervisor:		
Job Title:		Starting Salary:	Ending Salary:		
Responsibilities:					
From:	То:	Reason for leaving:			
May we contact your previous supervisor for a reference?			Yes	No	

Please explain fully all gaps in your employment history in excess of thirty (30) days:



## **Employment Application**

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	Military Service			
Branch of Service:		From:	То:	
Rank at Discharge:	Type of Discha	nrge:		
If other than honorable, explain:				
Disc	claimer and Signature			
I certify that answers given herein are true	and complete to the be	st of my knowledge	э.	
I authorize investigation of all statements necessary in arriving at an employment dec		lication for employ	ment as may b	е
I hereby understand and acknowledge that, employment relationship with this organizatemployee may resign at any time and the Ewithout cause. It is further understood that changed by any written document or by conwriting by an authorized executive of this or	tion is of an "at will" nat Employer may discharge It this "at will" employm Iduct unless such chang	ture, which means Employee at any t ent relationship m	that the time with or ay not be	
In the event of employment, I understand application or interview(s) may result in abide by all rules and regulations of the em	discharge. I understa	•	9	

Return this completed and signed application to: **Human Resources** Night Hawk Security and Consulting, LLC, PO Box 30099 Raleigh, NC 27622

Date:

Signature: