



**Employment Application**

Please complete the application below, providing as much detail as you can. To ensure this form is processed as quickly as possible, please print clearly if manually completed.

**Name**

Date	Last Name	First Name	Middle
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**Address / Contact Information**

Address	City	State	Zip
Phone # (xxx)xxx-xxxx	Mobile # (xxx)xxx-xxxx	Email	

**Personal Identification**

SSN #	CDL / ID	Expiration Date
	Hair Color	Eye Color

**Employment Information**

What position are you applying for?	
Full-Time or Part-Time?	
What days and hours are you available?	
Are you available to work weekends?	
Would you be available to work overtime, if necessary?	
If hired, on what date can you start work?	
If hired, on what date can you start work?	
What is your desired pay rate?	
Have you previously worked for Camden Security?	
If so, when?	

Do you currently have any friends or relatives working for Camden Security Services?	
If yes, state name(s) and relationship	

**Personal Information**

If hired, would you have a reliable means of transportation to and from work? (Y / N)	
Do you have any geographical restrictions for where you travel to work?	
If yes, please describe.	
If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?	
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?	
<p>If no, describe the functions that cannot be performed below.</p> <p><i>(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)</i></p>	
Are you currently employed?	
If so, may we contact your current employer?	

**NOTICE THAT POSITION HAS BEEN DESIGNATED SAFETY SENSITIVE**

The position and work location that you are applying for has been designated as safety sensitive because the duties to be performed in this position, or the work area in which the duties are to be performed, involve a substantial and real risk of injury or harm to the employee, co-workers or others in the work area, or a substantial and real risk of damage to products or property.

Employees who are assigned to this position are subject to random drug and alcohol testing under the Safety Sensitive Position Testing section of the Company’s Drug Free Workplace Policy.

**Education**

**High School**

Name		Address	
City	State	Zip	
Number of years completed?			
Did you graduate?			
Did you receive a Degree or Diploma?			

**College / University**

Name		Address	
City	State	Zip	
Number of years completed?			
Did you graduate?			
Did you receive a Degree or Diploma?			

**Vocational / Business**

Name		Address	
City	State	Zip	

Number of years completed?	
Did you graduate?	
Did you receive a Degree or Diploma?	

**Training & Experience**

Do you speak, write or comprehend any language other than English?	
If yes, which language(s)?	

**Answer the following questions if you are applying for a Guard Carded Position**

Do you have a Guard Card?	
Security / Guard Card #	
Commissioned or Non-Commissioned	
Firearm Permit #	
Baton License #	
Has your license / certification ever been revoked or suspended?	
If yes, state reason(s), date of revocation or suspension and date of reinstatement.	

**Employment History**

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Employer Name		Type of Business	
Address		Phone #	
City	State	Zip	

Dates of Employment	
Position and Duties	
Reason for Leaving	
May we contact this employer for a reference?	

Employer Name		Type of Business
Address		Phone #
City	State	Zip
Dates of Employment		
Position and Duties		
Reason for Leaving		
May we contact this employer for a reference?		

Employer Name		Type of Business
Address		Phone #
City	State	Zip
Dates of Employment		
Position and Duties		
Reason for Leaving		
May we contact this employer for a reference?		

## Military Experience

### Military Status

Active Military  
 Army    Navy    USAF    Marines

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Military Reserve  
 Army    Navy    USAF    Marines

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Non-Military

Decline to Self-Identify

### Veteran Status

Veteran  
 Recently Separated    Armed Forces Services Medal  
 Other Protected Veteran

Not a Veteran

Decline to Self-Identify

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Have you obtained any special skills or abilities as the result of military service?	
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If yes, please describe.	
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## References

List below three persons not related to you who have knowledge of your work performance within the last three years.

First Name		Last Name	
Address		City	
State	Zip	# Years Acquainted	
Title	Occupation	Phone #	

First Name		Last Name	
Address		City	
State	Zip	# Years Acquainted	
Title	Occupation	Phone #	

First Name		Last Name	
Address		City	
State	Zip	# Years Acquainted	
Title	Occupation	Phone #	

**Please Read Carefully, Initial Each Paragraph and Sign Below**

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials

I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials

I understand that nothing contained in the application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create an employment contract between the company and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

Initials

I understand and agree to the foregoing information and statements.

Date

Applicant's Signature

Revised 05/29/2019