



Employment Information

TO BE EMPLOYED BY SECURPROS:

1. YOU MUST BE 21 YEARS OF AGE OR OLDER
2. **HAVE 90 DAYS OR MORE EXPERIENCE**
3. HAVE NO CONVICTIONS; NO GUILTY PLEA OR VERDICT, NO PROBATION BEFORE JUDGMENT OR STET DOCKET; NO DWI OR DUI
4. BE DRUG FREE
5. HAVE A HIGH SCHOOL DIPLOMA OR EQUIVALENT
6. MUST BE ABLE TO READ, WRITE AND SPEAK ENGLISH FLUENTLY
7. HAVE EXCELLENT ORAL AND WRITTEN COMMUNICATION SKILLS IN ENGLISH
8. BE ABLE TO PASS REQUIRED TRAINING
9. BE ABLE TO STAND FOR 90% OF YOUR SHIFT
10. BE ABLE FOR VARIOUS SHIFTS, WEEKENDS AND HOLIDAYS AS MANY OF OUR SITES ARE 24 HOUR 7 DAY PER WEEK CONTRACTS
11. BE ABLE TO WORK YOUR FULL SHIFT WITHOUT THE USE OF TOBACCO PRODUCTS

WE OFFER THE FOLLOWING:

- WAGES FROM \$8.00 TO \$14.00
- WEEKLY PAY
- FREE TRAINING
- FREE UNIFORMS
- FLEXIBLE SCHEDULES
- HOLIDAY PAY
- PAID VACATION AFTER ONE YEAR OF CONTINUOUS EMPLOYMENT
- FULL OR PART - TIME EMPLOYMENT
- ADVANCEMENT OPPORTUNITIES
- REFERRAL BONUS
- **BONUS PAID FOR CURRENT DC OR MD SECURITY LICENSE COMBINED WITH HAVING RELIABLE TRANSPORTATION (CAR) AND WORKING TELEPHONE NUMBER.**

SECURITY PROTECTIVE SERVICES, INC.

t/a SECURPROS

9300 Annapolis Road, Suite 103, Lanham, MD 20706

Phone: (301) 459-8322 Fax: (301) 459-8324

DRUG FREE

Screening tests for alcohol and illegal drug use are required before hiring and during your employment here

APPLICATION FOR EMPLOYMENT

Date _____

Name _____
Last First Middle

Present Address _____
Street City State Zip

Previous Address _____
Street City State Zip

Home # () _____ Work # () _____ Cell # () _____ Pager # () _____

Are you related to anyone in SECURPROS? Yes ___ No ___ if Yes, Full Name _____ Relationship _____

Referred By: Walk-In ___ Newspaper Ad ___ Friend _____ Other _____

Employment Desired - Part-Time ___ Full-Time ___ Date you can start _____ Salary Desired _____

Please write the time you are available for work each day: **(BE SPECIFIC ON THE HOURS AVAILABLE FOR WORK)**

Sunday _____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____

Have you ever applied or worked for SECURPROS before? _____ If YES? When _____ Location _____ Position Held _____

Are you currently employed? _____ If YES, Who is your employer? _____ May we contact your employer? _____ Supervisor _____ Telephone Number _____

EMPLOYMENT HISTORY

List Below all the places you have worked. Begin with your present position and work back to your first position. If more room is needed, list on additional page.

1. Date Employed _____ Name and Address of Company _____ Positions Held _____ Last Salary _____ Reasons for Leaving _____
From _____ To _____

Supervisor's Name _____

2. Date Employed _____ Name and Address of Company _____ Positions Held _____ Last Salary _____ Reasons For Leaving _____
From _____ To _____

Supervisor's Name _____

3. Date Employed _____ Name and Address of Company _____ Positions Held _____ Last Salary _____ Reasons For Leaving _____
From _____ To _____

Supervisor's Name _____

4. Date Employed _____ Name and Address of Company _____ Positions Held _____ Last Salary _____ Reasons For Leaving _____
From _____ To _____

Supervisor's Name _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

SECURPROS APPLICATION FOR EMPLOYMENT

EDUCATION

INSTITUTION	ADDRESS (Include City and State)	NUMBER OF YEARS SPENT	DID YOU GRADUATE?	DIPLOMA / DEGREE OBTAINED
Name of High School				
Name of College				
Name of Graduate School				
Other Schools Attended				

MILITARY

Did you serve in the U.S. Military? YES ___ NO ___ If YES, what branch? _____

Describe any training you received that may be relevant to the position you are applying for.

GENERAL INFORMATION

1. Are you 21 years of age or older? YES ___ NO ___
2. Have you ever pled "guilty" or "no contest" to, or been convicted of a crime or arrested or received Probation Before Judgment or Stet Docket for any reason? Yes ___ No ___. If YES, explain.

3. Have you ever been bonded? YES ___ NO ___
4. Do you have a Drivers License? YES ___ NO ___ If YES, what State? _____ Are you able to provide a copy of your driving record? _____
5. You may be required to work extra hours or shifts during different days and times of the week. Is this a problem for you? YES ___ NO ___
6. Are you willing to work overtime if required? YES ___ NO ___ If NO, why? _____
7. Do you have your own transportation? YES ___ NO ___ If No, can you be at work on time? YES ___ NO ___
8. Can we call you at the telephone number you have listed on this application? YES ___ NO ___ if YES, when is the best time to call? _____
9. Are you willing to submit a Drug test? YES ___ NO ___ Are you legally eligible for employment in this country? Yes ___ No ___
10. Do we have your permission to perform a complete background investigation? YES ___ NO ___
11. Applying for a Security Position, you will be required to have or be able to obtain a Maryland Watchman's Clearance Card and / or a Washington DC Security Guard License and / or a Virginia Security Guard License. Is this a problem for you? YES ___ NO ___
12. Why are you applying for this Job?

Emergency Contact: _____ Phone Number: _____

It is understood and agreed that, if I am selected for employment, my first 90 days period of employment is a probationary period. I fully understand and agree that I may be terminated during this period with and without good cause and there will be no subsequent recourse against Security Protective Services, Inc. t/a SECURPROS. I further understand that falsifying any information on this application will result in my not being considered for the position available or to be dismissed, if I should be selected for employment based on the false information I have provided. I am authorizing Security Protective Services, Inc. t/a SECURPROS to investigate all statements made in my application and to conduct a complete background investigation for the purpose of arriving at an employment decision.

I understand that employment at Security Protective Services, Inc. t/a SECURPROS is not for a fixed period. Security Protective Services, Inc. t/a SECURPROS may at any time, for any reason, terminate this employment. The terms of this employment relationship cannot be altered except in writing by an authorized company officer.

Signature _____ Date _____

BACKGROUND INFORMATION CONTINUED

PLEASE LIST YOUR PREVIOUS ADDRESSES FOR THE PAST SEVEN YEARS.
INCLUDE ALL INFORMATION.

DATES FROM/TO	STREET ADDRESS	CITY	COUNTY	STATE	ZIP CODE
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DATES FROM/TO	STREET ADDRESS	CITY	COUNTY	STATE	ZIP CODE
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DATES FROM/TO	STREET ADDRESS	CITY	COUNTY	STATE	ZIP CODE
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FIRST NAME	MIDDLE NAME	LAST NAME
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DATE OF BIRTH

SOCIAL SECURITY NUMBER

SECURPROS

9300 Annapolis Road ste 103
P.O. Box 1319
Lanham, MD 20703
(301) 459-8322
(301) 459-8324 FAX

APPLICANT AUTHORIZATION AND RELEASE FORM

I, _____ hereby authorize **SECURITY PROTECTIVE SERVICES, INC., t/a SECURPROS** or other authorized representatives of the company bearing this release to investigate all statements made in my application (i.e., employment history). I understand all statements contained in my employment application may be used and are necessary only in arriving at an employment decision.

I hereby direct you to release such information upon request of SECURPROS or other authorized representatives of the company.

I hereby fully release and discharge my prospective employer or other authorized representatives of the company or other sources providing information to my prospective employer from all claims and damages arising out of or relating to any investigation of my background for said purposes.

Name: _____ Other/Alias: _____
(First, Middle, Last- Please Print)

Date of Birth: _____ Social Security #: _____

Driver's License #: _____ State: _____

Signature: _____ Date: _____