

Last Name		First		MI	For Personnel use only		Date of application	
Street address					Type(s) of work desired		Social Security number	
City		State		ZIP		Home telephone		Work telephone
How were you referred to us? (Circle only one.)	A By your college	B Advertisement	C Employment agency	D By an employee	If so, give name:	E Open house	F Walk-in	G Other

Please read carefully and complete by printing in ink or typing.

An Equal Opportunity Employer

We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

Provide all information requested.

Your complete application form will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time.

Employment Record

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Last or present company		Type of business		Type or classification of job	
Street address		Phone number		Brief description of job duties	
City		State		ZIP code	
Supervisor's name		Phone number			
Base salary		Dates worked			
		From		To	
Reason for leaving					
Last or present company		Type of business		Type or classification of job	
Street address		Phone number		Brief description of job duties	
City		State		ZIP code	
Supervisor's name		Phone number			
Base salary		Dates worked			
		From		To	
Reason for leaving					

Military Record

Branch of service From To

Present military affiliation:

None Reserve (active) Reserve (inactive)

Kinds of training and duty while in service

Professional/Work References

List two past supervisors and one person who is not related to you who have knowledge of your qualifications for the position for which you are applying.

Name	Title/relationship	Address (street, city, state, ZIP code)	Phone no. (include area code)	Occupation

May we contact your present employer? Yes
No

Wage or salary required

Date available

Driving Information

Drivers License #	State Issued	Expiration Date

Commercial Drivers License #	State Issued	Expiration Date	Class	CDL #	CDL Endorsements

Have you ever been fired or asked to resign from any job during the past five years? If YES, please give details below.

Have you ever been found guilty of ANY law violations other than parking tickets or juvenile offenses?

Records do not cause automatic disqualification, but are reviewed as related to the job applied for. If you have convictions, list them here. If you do not remember your record, contact the appropriate law enforcement agency for this information. Dakota Security Systems is as interested in honest and accurate disclosure as in the record itself. If yes, please give details in this box.

Explanation:

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed. I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.

Date

Signature

If any of your educational or employment records are under other than the above name, please provide other names.