



## APPLICATION FOREMPLOYMENT

### PLEASE PRINT CLEARLY

Dear Applicant, We appreciate your interest in Granco Security Services and assure you that we are interested in getting to know you. A clear understanding of your background and work history will aid us in seeking to place you in a position which, in our judgment, best meets your qualifications. We are an Equal Opportunity Employer and will not unlawfully discriminate on the basis of race, color, sex, religion, national origin, age, marital or veteran status, or the presence of a medical condition or handicap.

### PERSONAL:

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
(Last) (First) (Middle)

E-Mail Address: \_\_\_\_\_ Facebook Address: \_\_\_\_\_

Telephone Number: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Other: \_\_\_\_\_

List any other name(s) you use or have used: \_\_\_\_\_ Are you over 18 years of age? YES NO

Current Address: \_\_\_\_\_  
(Number) (Street) (City) (State) (Zip)

How long lived here? \_\_\_\_\_ Yrs. \_\_\_\_\_ Mos. Circle One: Own Rent Board Live w/parents

Landlord's Name and Telephone: \_\_\_\_\_  
Previous: (1) \_\_\_\_\_ From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(2) \_\_\_\_\_ From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(3) \_\_\_\_\_ From \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Are you a U.S. citizen? YES NO If no, are you authorized to work in the United States? YES NO

Have you been previously employed here? YES NO If yes, date(s) \_\_\_\_\_ Supervisor(s) \_\_\_\_\_

Have you filed an application here before, and if so, date(s): YES NO \_\_\_\_\_

List any friends or relatives working here: \_\_\_\_\_

Transportation you will use to come to work? Bus Taxi Auto, Year \_\_\_\_\_ Make \_\_\_\_\_ Other \_\_\_\_\_

Do you have a valid Driver's licenses? YES NO State \_\_\_\_\_ License Number: \_\_\_\_\_

Has your driver's license ever been revoked or suspended? YES NO If yes, when? \_\_\_\_\_

List all traffic violations for the past 5 years:

1. Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Offense: \_\_\_\_\_ City: \_\_\_\_\_ Penalty: \_\_\_\_\_  
2. Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Offense: \_\_\_\_\_ City: \_\_\_\_\_ Penalty: \_\_\_\_\_

STATE LAW REQUIRES ALL EMPLOYEES TO BE FINGERPRINTED. **Have you ever been convicted of a crime?**

YES NO If yes, list where, when and nature of offenses: \_\_\_\_\_

### EMPLOYMENT DESIRED:

Position(s) applied for: \_\_\_\_\_ Full time Part time \_\_\_\_\_ hours/week  
Granco Security is a Drug Free Workplace. Are you willing to take a physical examination and/or drug screen? YES NO  
Do you have any special training, skills, qualifications or other experiences that relate to the position(s) applied for?

List professional, trade, business, or civic activities and offices held, **excluding groups that the name or character of which indicate race, color, religion, sex, national origin, handicap, marital or veterans status** \_\_\_\_\_

State any additional information that you feel may be helpful to us in considering your application \_\_\_\_\_

Salary/Wage desired \$ \_\_\_\_\_ . Date available to start work: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ .

Name, address, telephone number and relation of person to be notified in the event of an accident or emergency: \_\_\_\_\_

**PERSONAL CHARACTER REFERENCES (Do NOT include relatives or former employers):**

Name	Relationship	Years Known	Address & Phone #	Best time to Call
			_____	
			_____	
			_____	

**EDUCATION:**

Name & Location	Years Completed	Degree/Diploma	Courses of Study
Elementary_____			
High School_____			
College_____			
Graduate_____			
Vocational/Training_____			

**EMPLOYMENT: List below all present and past employment, beginning with the MOST recent through last 10 years. (Use extra page if necessary):**

Name, Address & Telephone No.	Dates	Title and Duties	Wages	Reason for Leaving	Supervisor's Name, Title
1.	From ____/____/____	_____	Starting:(hr/wk/yr) \$	Quit Discharge	
		_____		Layoff Comments:	
( )		_____			

Name, Address & Telephone No.	Dates	Title and Duties	Wages	Reason for Leaving	Supervisor's Name, Title
2.	From ____/____/____	_____	Starting:(hr/wk/yr) \$	Quit Discharge	
	To ____/____/____	_____		Layoff Comments:	
( )		_____			

Name, Address & Telephone No.	Dates	Title and Duties	Wages	Reason for Leaving	Supervisor's Name, Title
3.	From ____/____/____	_____	Starting:(hr/wk/yr) \$	Quit Discharge	
	To ____/____/____	_____		Layoff Comments:	
( )		_____			

Name, Address & Telephone No.	Dates	Title and Duties	Wages	Reason for Leaving	Supervisor's Name, Title
4.	From ____/____/____	_____	Starting:(hr/wk/yr) \$	Quit Discharge	
	To ____/____/____	_____		Layoff Comments:	
( )		_____			

Name, Address & Telephone No.	Dates	Title and Duties	Wages	Reason for Leaving	Supervisor's Name, Title
5.	From ____/____/____	_____	Starting:(hr/wk/yr) \$	Quit Discharge	



**Page Reserved for additional employment history, references, or applicant notes:**