

Bolt Security Guard Services

License No. 1003227

Application for Employment

NOTE TO CANDIDATE: The following information is needed to help make the best possible employment selection. All portions of this application pertaining to you must be completed. Bolt Security Guard Services is committed to a policy of providing equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, age, gender, religion, national origin, marital status, physical or veteran status, disability, sexual orientation, genetic information, gender identity, gender expression or any other characteristic protected by law. If an accommodation is required, it is the responsibility of the candidate to inform the Human Resources Representative.

Name _____ Date _____
Last First Middle

Address _____
Street City State Zip

Primary Phone: (____) _____ Alternate Phone: (____) _____

Email Address _____ Are you age 18 or over? Yes No

Position Applied For: ___ Security Guard ___ Security Supervisor ___ Patrol
 ___ Events Only ___ Dispatch ___ Administrative

Check All that Apply: Regular Full-time (40 hrs per week) ___ Regular Part-Time (<40 hrs per week)
 Occasional (As needed for Events/Special Projects) ___ Temporary (< 6 months) _____

What days and/or hours are you unable to work? _____

Are you willing to work overtime, as required? Yes No

Are you willing to work weekends, as required? Yes No

Are you willing to work holidays, as required? Yes No

Have you ever been employed by Bolt Security Guard Services? Yes No

If yes: From: _____ to _____ Title: _____

Are you legally eligible for employment in the U.S. without sponsorship? Yes No (Proof of identity & eligibility will be required upon employment.)

If you were referred to us, please provide the individual's name and relationship to you: _____

Do you have any relatives working here? Yes No How did you learn of this opening? _____

If applying for a Security Guard position, do you have your Arizona Department of Public Safety (AZ DPS) **unarmed** security guard license? Yes No Do you have an **armed** security guard license? Yes No

Do you currently work for another Security Guard company? Yes* No

*For Events Only positions, it is acceptable to work for another security service provider (in-house or external); however, for all REGULAR positions, guards may not work for the competition.

CRIMINAL RECORDS

Have you ever been convicted of a crime(s), including misdemeanors, which has not been annulled, vacated, expunged or sealed by a court? Yes No If yes, explain in full : _____

*(NOTE: The conviction of a crime does not necessarily exclude a candidate from consideration of employment).

EDUCATION

School	Name & Location of School	GPA	Course of Study (Provide Major)	Did you graduate?	Degree (Do not provide year)
High School			N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A
College/University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade/Vocational				<input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYMENT HISTORY (Provide at least 5 years and start with current/recent. Use back side, if necessary.) Please provide accurate and complete employment history, even if you attach a resume (do not put “see resume”). **Have you ever been asked to resign or involuntarily been terminated from a job?**

Yes No If yes, please explain: _____

Have you encountered gaps in your employment history that are not due personal illness, injury or disability?

Yes No If yes, please explain: _____

1 Employer (Name)	Address, City, State, Zip	Telephone
Dates of Employment: From: _____ To: _____ (Month & Year) (Month & Year)	Salary Start: _____ per _____ End: _____ per _____	
Starting Title:	Ending Title:	
Name and Title of Supervisor:		
Description of Duties:	Reason for Leaving:	
May we contact employers listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No		

2 Employer (Name)	Address, City, State, Zip	Telephone
Dates of Employment: From: _____ To: _____ (Month & Year) (Month & Year)	Salary Start: _____ per _____ End: _____ per _____	
Starting Title:	Ending Title:	
Name and Title of Supervisor:		
Description of Duties:	Reason for Leaving:	
May we contact employers listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No		

3 Employer (Name)	Address, City, State, Zip	Telephone
Dates of Employment: From: _____ To: _____ (Month & Year) (Month & Year)	Salary Start: _____ per _____ End: _____ per _____	
Starting Title:	Ending Title:	
Name and Title of Supervisor:		
Description of Duties:	Reason for Leaving:	
May we contact employers listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No		

*If this does not include all employers or employment history for at least the **last 5 years**, please use back of sheet.

CERTIFICATIONS/LICENSES/REGISTRATIONS

Include expiration dates, etc. Verification will be completed based upon information provided.

Certificate, License or Registration	Issued By	Issue Date	Expiration Date

SPECIAL TRAINING OR SKILLS

List other special training or skills: _____

FOREIGN LANGUAGE (Complete if applicable to the position. An assessment may be completed prior to hire.)

Language	Proficient in Reading	Proficient in Speaking	Proficient in Writing
	Circle One: Fluent Conversationalist N/A	Circle One: Fluent Conversationalist N/A	Circle One: Fluent Conversationalist N/A

DRIVING RECORDS (Complete for driving positions only.)

Do you have a valid unexpired driver's license: Yes No Specify State of Issue: _____

Do you have access to a vehicle to use for business purposes, if applicable to the position? Yes No

Is there any reason that you would not be approved as a driver when a motor vehicle record report is run? Yes No If yes, explain: _____

PROFESSIONAL REFERENCES

List three professional references, which you have known at least one year. Please use supervisors, co-workers, instructors who are familiar with your work. **Do not list relatives, friends or Bolt Security Guard Services employees.** Only list people you want contacted.

Name	Telephone	Occupation / Business	Relationship	How Long Known

APPLICANT ACKNOWLEDGEMENT OF TERMS AND CONDITIONS OF APPLICATION

In exchange for **BOLT SECURITY GUARD SERVICES** consideration of this employment application:

I certify that all information I have supplied in this application and any other form, oral or written is true and accurate, and I agree that any misstated, misleading, incomplete or false information is grounds for rejection of this application, refusal to hire or immediate discharge without recourse.

The term "Company" or "Bolt Security Guard Services" as used refers to both of the foregoing entities and any affiliates and/or subsidiaries related to their business

I understand and agree that **BOLT SECURITY GUARD SERVICES**, any agent acting on their behalf, as well as any other person responding to reference request pursuant to this application, can and will seek and/or disclose any and all information about me which **BOLT SECURITY GUARD SERVICES**, agent or agents, or persons may have. I specifically authorize said disclosure and agree to hold all such corporations, agents, or persons harmless for the same. That is, I will not file a lawsuit, claim or charge against them for such disclosure. Nor will I threaten same or otherwise seek any kind of compensation for such disclosure.

I understand and agree with the fact that **BOLT SECURITY GUARD SERVICES** maintains a drug-free workplace, that maintenance of it is essentially for the safety of the workplace and employees, and that I may be required to undergo drug and/or alcohol impairment screening and testing. I also understand and agree that I may be subject to such testing during the course of my employment. I understand that, subject to applicable law, **BOLT SECURITY GUARD SERVICES** shall be the sole judge of the acceptability of any tests results. I also acknowledge that I have been advised that **BOLT SECURITY GUARD SERVICES** is an Equal Opportunity Employer and that **BOLT SECURITY GUARD SERVICES** administers its employment policies in a nondiscriminatory manner.

I specifically authorize **BOLT SECURITY GUARD SERVICES** to investigate my background, including any and all references, available criminal and other judicial records, and my credit record, consistent with applicable law. I understand that **BOLT SECURITY GUARD SERVICES** will notify me if and when a credit record investigation is performed, and the sources investigated. I authorize **BOLT SECURITY GUARD SERVICES** to use all legal means at its disposal to assess my suitability for employment. I make this authorization in return for **BOLT SECURITY GUARD SERVICES** consideration of me for employment, and I specifically release and hold **BOLT SECURITY GUARD SERVICES** harmless for any and all liabilities arising out of their investigation of my application for employment.

I understand and agree that, if hired, my employment will be at-will, and that I or **BOLT SECURITY GUARD SERVICES** can terminate this employment relationship at any time, with or without notice or cause, for any reason not prohibited by law.

I hereby certify that I have read and understand the Terms and Conditions of this Application for Employment.

Applicant's Signature _____

Date _____

This application for employment will remain active for a limited time.

Equal Opportunity Employer
