



# Employment Application

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 Olympia, WA 98506-3921  
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## GENERAL INFORMATION

Position applied for \_\_\_\_\_

Social Security No. \_\_\_\_\_

*(Note: Failure to submit social security number on this form will not prohibit employment consideration. Social security number may be required on other forms prior to employment.)*

Name (Last, First, and Middle Initial)	Home Phone
Mailing Address (Include apartment number, if any)	Work (message) Phone
City, State, Zip	Other (cellular) Phone

## EDUCATION

- a. Check highest grade completed. 6 7 8 9 10 11 12  
 b. If you did not complete high school, do you have a high school equivalency diploma?  Yes  No  
 c. Check number of years of post high school education. 1 2 3 4 5 6 7

	Name and Location of Institution (including trade schools)	Degree Received	Major or Specialty	Dates Attended
1	High School:			
2				
3				
4				

## WORK HISTORY

1.	Current Employer	Employer's Address	Employer's Phone Number (include area code):	
	Your Title	Months & Years Employed In this Position	Total Months	Avg. Hrs. Per Wk
		From	To	Last Salary
	Immediate Supervisor's Name	Reason for Leaving:		No. of Employees Supervised
	Duties:			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

2.	Employer	Employer's Address	Employer's Phone Number (include area code):	
	Your Title	Months & Years Employed In this Position	Total Months	Avg. Hrs. Per Wk
		From	To	Last Salary
	Immediate Supervisor's Name	Reason for Leaving:		No. of Employees Supervised
	Duties:			

3.	Employer	Employer's Address			Employer's Phone Number (include area code):		
Your Title		Months & Years Employed In this Position			Total Months	Avg. Hrs. Per Wk	Last Salary
		From		To			
Immediate Supervisor's Name		Reason for Leaving:			No. of Employees Supervised		
Duties:							

4.	Employer	Employer's Address			Employer's Phone Number (include area code):		
Your Title		Months & Years Employed In this Position			Total Months	Avg. Hrs. Per Wk	Last Salary
		From		To			
Immediate Supervisor's Name		Reason for Leaving:			No. of Employees Supervised		
Duties:							

Other Skills and Abilities (please include any tool or computer proficiencies, i.e. welding, MS Office etc...)

### REFERENCES

List names, addresses and relationships of three persons not related to you who know your qualifications:

Name	Address	Phone	Relationship

### MISCELLANEOUS

- a. Other than English, what languages do you speak, read, or write fluently?
- b. Have you been convicted of a misdemeanor or felony?  Yes  No  
If Yes please explain: \_\_\_\_\_
- c. Are you willing to provide your own transportation if necessary for your employment?  Yes  No.
- d. When will you be available to start work? (No date is necessary if you are available as soon as you give two (2) weeks notice.)  
\_\_\_\_ Month \_\_\_\_ Day \_\_\_\_ Year
- e. **CERTIFICATION**--Each Application Requires Current Date and Original Signature  
I hereby certify that all entries on both sides and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment in the service of Always Safe & Lock Inc. I understand that all information on this application is subject to verification and I consent to criminal history background checks. I also consent to references and former employers and educational institutions listed being contacted regarding this application. I further authorize Always Safe & Lock Inc. to rely upon and use, as it sees fit, any information received from such contacts.

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_