



Application for Employment

Security Eye Patrol, Inc.
2282 Fourth Street, Livermore, CA 94550
(925) 455-6585 office (925) 215-2425 fax
www.securityeyeinc.com

General Information

Last Name: _____ First Name: _____ Middle Initial _____

Address: Street _____ Apt _____

City _____ State _____ Zip Code _____

Home Phone Number () _____ -- _____ Alternate Phone Number () _____ -- _____

Social Security Number _____ Today's Date ____/____/____

Email Address _____ @ _____

Position Desired: _____ Salary Desired: \$ _____ Date you can Start: ____/____/____

Referred by _____ What foreign languages do you speak fluently? _____

In order to obtain a California Guard Registration Card, you must be over the age of 18. Are you age 18 or older? **Y / N**

Past Experience/ Education

High School Attended _____ College Attended _____

U.S Military Experience? **Y / N** Rank: _____ Present Membership in National Guard or reserves? **Y / N**

Do you possess a valid California Guard Registration Card? **Y / N** Card # expiration _____

Current / Previous Employers Phone Number Reason for leaving? Position / Salary. From – To (Dates)

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Reference (Name) Phone Number Relation Years Acquainted

Reference (Name)	Phone Number	Relation	Years Acquainted

Authorization

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without previous notice.

Signature: _____ Date: _____

For Office Use Only: Interviewed By: _____ Date: _____

Remarks: _____

Hired? **Y / N** _____ Reason? _____