## **Royal Protection & Security**

PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED **EXCEPT SIGNATURE** 

## APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE	PAGES 1-5.		DATE		
Name					
	Last	First	Middle		Maiden
Present address					
	Number	Street	City State	•	
How long		Soc	cial Security No.		
Telephone ( <u>)</u>			B (Date/Month/\	/ear)	
f under 18, please list a	age				
			Mon Tue	ailable to work Thur Fri Sat Sun	
How many hours can y	ou work weekly?		Can you work	nights?	
Employment desired	□FULL-TIME ONLY	□PART-TIME (	NLY □FU	JLL- OR PART-T	IME
					IIVIL
When available for wor					IIVIL
					TIVIL
					IIVIL
		LOCATION (Complete mailing address)	NUMBER	R OF YEARS PLETED	MAJOR & DEGREE
When available for wor	k?	(Complete mailing	NUMBER	R OF YEARS	MAJOR &
When available for work TYPE OF SCHOOL High School	k?	(Complete mailing	NUMBER	R OF YEARS	MAJOR &
When available for work TYPE OF SCHOOL High School College	k?	(Complete mailing	NUMBER	R OF YEARS	MAJOR &
When available for work TYPE OF SCHOOL High School	k?	(Complete mailing	NUMBER	R OF YEARS	MAJOR &
When available for work TYPE OF SCHOOL High School College	k?	(Complete mailing	NUMBER	R OF YEARS	MAJOR &
When available for work  TYPE OF SCHOOL  High School  College  Bus. or Trade School	k?	(Complete mailing	NUMBER	R OF YEARS	MAJOR &
When available for work  TYPE OF SCHOOL  High School  College  Bus. or Trade School	k?	(Complete mailing	NUMBER	R OF YEARS	MAJOR &
When available for work  TYPE OF SCHOOL  High School  College  Bus. or Trade School  Professional School	NAME OF SCHOOL  IN CONVICTED OF A CR	(Complete mailing address)	NUMBER	R OF YEARS	MAJOR & DEGREE
When available for work  TYPE OF SCHOOL  High School  College  Bus. or Trade School  Professional School  HAVE YOU EVER BEE authomatically bar you	NAME OF SCHOOL  IN CONVICTED OF A CR	(Complete mailing address)	NUMBER COM	A conviction do	MAJOR & DEGREE

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#### APPLICATION FOR EMPLOYMENT

	APPLIC	ATION FOR EMPLO	DYMENT				
DO YOU HAVE A DRIVER'S LICENSE?	□ Yes	□ No					
Driver's license number		f issue	□ Operator	☐ Commercial (CDL)	□Chauffeur		
Have you had any accidents during the pas Have you had any moving violations during		How many? How Many?					
Please outline your computer skills.		Computer & Office Skills					
Are you skilled in using basic office compute as WORD or EXCEL?	er prograr	ms such					
Please list two references. Prefer reference	es other th	nan relatives or previ	ous employers				
Name		Name					
Position							
Company							
Address		•					
Telephone ()		Telepho	ne <u>( )</u>				
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.							

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Ar	PPLICATION FOR EMI	LOTIVILIAT					
	MILITARY						
HAVE YOU EVER BEEN IN THE ARMED FORCES? ☐ Yes ☐ No							
ARE YOU NOW A MEMBER OF THE NATION	IAL GUARD?	□ Yes □	No				
Specialty	Date Entered		Discharge Date	)			
Work Please list your work experier If you were self-employed, give				job held.			
Name of employer Address		ame of last upervisor	Employment dates	Pay or salary			
City, State, Zip Code Phone number			From	Start			
			То	Final			
	Your	last job title					
Reason for leaving (be specific)							
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.							
Name of employer Address		me of last upervisor	Employment dates	Pay or salary			
City, State, Zip Code Phone number			From	Start			
There hamber			То	Final			
	Your	Last Job Title					
Reason for leaving (be specific)							
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.							

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#### APPLICATION FOR EMPLOYMENT

Work experience	Please list your work expe If you were self-employed					job held.
Name of employ Address	rer			Name of last supervisor	Employment dates	Pay or salary
City, State, Zip C Phone number	Code				From	Start
					То	Final
				Your last job title		
Reason for leavi	ng (be specific)					
company.						
, .						
Name of employ Address	ver .			Name of last supervisor	Employment dates	Pay or salary
City, State, Zip C Phone number	Code				From	Start
					То	Final
				Your last job title		
Reason for leavi	ng (be specific)					
List the jobs you company.	held, duties performed, ski	ills used o	or learned,	advancements or pr	omotions while you wo	rked at this

### PLEASE READ CAREFULLY

#### APPLICATION FORM WAIVER

In exchange for the consideration of my job application by **ROYAL PROTECTION & SECURITY** (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of ROYAL PROTECTION & SECURITY, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and ROYAL PROTECTION & SECURITY may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing during employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company will request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. A complete criminal background check will be conducted. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of 6 months days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.