# Employment Application Hillside Investigative Services LLC

## Applicant Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Full Name**: |  |  |  | Date: |
|  | Last | First | M.I. |  |
| **Address:** |  |  |
|  | Street Address | Apartment/Unit # |
|  |  |  |  |
|  | City | State | ZIP Code |
| **Phone:** |  |  **Email** | :  |
| **Date of Birth**: |  | **Social Security No**.: |  |  **Driver License ID#:**  |  |
| **Are you a citizen of the United States?** | YES [ ]  | NO [ ]  |  If no, are you authorized to work in the U.S.? | YES [ ]  | NO [ ]  |
| **Have you ever worked for this company?** | YES [ ]  | NO [ ]  |  If yes, when? |   |
| **Have you ever been convicted of a misdemeanor or felony?** | YES [ ]  | NO [ ]  | If yes, explain?  |
|  |

## Education

|  |  |  |  |
| --- | --- | --- | --- |
| **High School**: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES [ ]  | NO [ ]  | Diploma: |  |
| **College:** |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES [ ]  | NO [ ]  | Degree: |  |
| **Other**: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES [ ]  | NO [ ]  | Degree: |  |
|  |
| Military Service

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Branch:** |  | From: |  | To: |  |
| **Rank at Discharge:** |  | **Type of Discharge**: |  |
| If other than honorable, explain: |  |

 |

## References

Please list three professional references.

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  | Position: |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  | Position: |  |
|  |  |  |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: |  |
| Address: |  | Position: |  |

##  Previous Employment

|  |  |  |  |
| --- | --- | --- | --- |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |
| Job Title: |  | Hourly Pay Rate: | $ | Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
|  |  |  |  |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |
| Job Title: |  | Hourly Pay Rate: | $ | Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
|  |  |  |  |
| Company: |  | Phone: |  |
| Address: |  | Supervisor: |  |
| Job Title: |  | Hourly Pay Rate: | $ | Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |
| May we contact your previous supervisor for a reference? | YES [ ]  | NO [ ]  |  |
| Law Enforcement / Private Investigator / Security GuardAre you an Active Police or Peace Officer? YES [ ]  NO [ ]  If yes, provide location, Agency & Department?Police Officer [ ]  Peace Officer [ ] Location: Agency: Dept: |
| Are you a Retired Police or Peace Officer? YES [ ]  NO [ ]  If yes, provide location, Agency & Department?Retired Police Officer [ ]  Retired Peace Officer [ ] **Location: Agency:** **Dept:****Date Retired:**  |
| **Are you a Licensed Private Investigator?** YES [ ]  NO [ ]  If yes, provide State & UID# & expiration date?UID# State: Expires: |
| **Are you employed by another Private Investigator?** YES [ ]  NO [ ]  If yes, provide UID# & Company Name?**UID# Company’s Name:** |
| **Are you employed by another Security Agency?** YES [ ]  NO [ ]  If yes, provide UID# & Company Name?**UID# Company’s Name:** |
| **Possess a Pistol Permit / Concealed Carry License?** YES [ ]  NO [ ]  If yes, provide ID# & County/State issued?**ID# Issuing County/State:**  |
| **HR-218 & S1132 Certified**: YES [ ]  NO [ ]   |
| **Are you a Licensed Security Guard?** YES [ ]  NO [ ]  If yes, provide the **Licensed State and ID/Certificate** # below: **New York** [ ]  **UID#:** **Expires: ARMED** [ ]  or **UNARMED** [ ]  **Pennsylvania** [ ]  **Act 235 Certified**: [ ]  **Expires: ARMED** [ ]  or **UNARMED** [ ]  **Vermont** [ ]  **Credential #:** **Expires: ARMED** [ ]  or **UNARMED** [ ]   |
| **Position(s) applying for?****Unarmed Security Agent [ ]  Armed Security Agent [ ]  Private Investigator [ ]** **Office / Administration [ ]  Other [ ]**  |

## Emergency Contacts

Emergency Contact #1: Relationship:

|  |
| --- |
| Contact Address: Contact Phone #: |

Emergency Contact #2: Relationship:

|  |
| --- |
| Contact Address: Contact Phone #: |

## Disclaimer and Signature

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ certify that my answers and provided information are true and complete to the best of my knowledge. I agree to a comprehensive background/criminal check with the submission of this application, as required for hire. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate release.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |