

C. & C. SECURITY PATROL, INC.

"MORE THAN JUST ANOTHER SECURITY COMPANY"

1684 Decoto Road # 161 Union City, California 94587

State License # PPO 12550

Date: _____

Name: _____
(First) (Middle Initial) (Last)

Current Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (____)____-____ Alternate Phone: (____)____-____

Email: _____

Date of Birth: _____ Soc. Sec. No.: _____

Are you over 18 years of age? Yes No

Are you currently employed? Yes No

If so, Can we contact your employer? Yes No

Phone Number: (____)____-____

Are you a citizen of the United States? Yes No

How long have you been a citizen: _____ Months / Years

If not, can you show authorization to work in the U.S.? Yes No

Do you have transportation available for work? Yes No

Driver License Number: _____ State: _____ Exp.: _____

Do you now hold a registered guard card? Yes No

Guard Card #: G_____ Expiration Date: _____

Are you currently enrolled in the Military? Yes No

If so, what branch: _____ Highest rank held: _____

LIST ENTIRE EMPLOYMENT LAST 10 YEARS - INCLUDE U.S. MILITARY SERVICE & VOLUNTEER WORK			
LIST MOST RECENT EMPLOYER FIRST	MO. YR.	SUPERVISORS	PHONE NUMBER
COMPANY NAME	FROM		
FULL ADDRESS	TO	REASON FOR LEAVING	
DEPARTMENT POSITION	SALARY		
COMPANY NAME	MO. YR.	SUPERVISORS	PHONE NUMBER
	FROM		
FULL ADDRESS	TO	REASON FOR LEAVING	
DEPARTMENT POSITION	SALARY		
COMPANY NAME	MO. YR.	SUPERVISORS	PHONE NUMBER
	FROM		
FULL ADDRESS	TO	REASON FOR LEAVING	
DEPARTMENT POSITION	SALARY		

I authorize investigation of all matters contained in this application and agree that if any misrepresentation has been made by me herein, or if the results of such investigation are not satisfactory, any offer of employment made may be withdrawn, or my employment terminated immediately without any obligation or liability to me, other than for payment, at the rate agreed upon, for services actually performed if I have been employed.

I also authorize all persons, schools, company's, corporation credit bureaus, former employers, and law enforcement agencies to supply any information concerning my background and release them from all liability and responsibility arising from their doing so.

I understand all appointments are probationary, during which time I must demonstrate my fitness for continued employment. I further certify that all statements made by me on this application are true and complete to the best of my knowledge and belief.

I understand that C. & C. Security Patrol, Inc. has work available seven (7) days per week and twenty-four (24) Hours per day. If employed, I agree to work any hour(s), day(s), or shift(s) deemed necessary by management.

Applicant Signature: _____ **Date:** _____