## Racine's Locksmithing & Security, Inc.

LaJunta 802 West 1st 719-384-4707 Pueblo 3930 Ridge Dr Ste.A 719-542-8336

Fax: 719-542-4656

## **EMPLOYMENT APPLICATION**

Please print and answer all questions completely. If you have a resume please attach.

Date:	Date avail	Date available to start:			
PERSONAL DATA:					
Name:					
Last	First	Middle			
SSN:	Are you 18 years or older?				
Address:					
City:	State:	Zip:			
Phone numbers:					
Type of work desired: Full time	Part time				
Have you ever had your Driver's License	Suspended?				
Have you ever been convicted of a felony	v or pled nolo contendere to a felony? Y	es No			
If yes, please explain(conviction will not necessarily disqualif	y an applicant)				
Are you willing to take a drug test?	Yes No				
Have you had Sales/Marketing experience	e? Yes No				
If yes, how many years?					
Have you ever had a security clearance?		If so what type?			
Basic Top	Secret				
WORK EXPERIENCE: Note: Start with most recent position,	please fill in all blanks even if attaching	resume.			
Present/Last Employer/Business Name	Type of Business:	Telephone:			
Address: Start	/ Ending Date:	Rate of Pay:			
Reason for leaving:					
Job Title:	Supervisor and Title:	May we contact?			

Describe Responsibilities:

Previous Employer:	Type of Business:	Telephone:		
Address:	Start/ Ending Date:	Rate of Pay:		
Reason for leaving:				
Job Title:	Supervisor and Title: May we contact?			
Describe Responsibilities:				

## **EDUCATION AND TRAINING**

Highest Level of Education	Name and Address		Degree/Cert.	Major/Field of Study			
			Diploma/Cert. yes year no				
<b>REFERENCES</b> - list 3 Business References (DO NOT LIST RELATIVES OR PERSONAL FRIENDS)							
Name	Area code/Telephone	Address		Relationship			

## APPLICANT STATEMENT

PLEASE READ BEFORE SIGNING BELOW: The facts set forth in my application are true and complete. I authorize my former employers to furnish all information pertaining to my work record. I hereby release my former employers from all liability on account of furnishing such information. I understand that if employed, false statements, omissions or misleading statements on this application, regardless of the time they are discovered, shall be considered sufficient cause for dismissal. I also agree that my employer shall not be held liable in any respect if my employment is terminated because of such omissions or false or misleading statements. The Company is hereby authorized to investigate my employment history, including contacting employers listed and to verify my education and training.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_