



WEINSTEIN SECURITY, INC.

EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. We comply with all applicable Federal, State, and local laws concerning discrimination in employment. We also comply with laws regulating the operations of a Private Patrol Operator in the state of California. This requires us to inquire about criminal convictions and to verify that each applicant is at least 18 years of age. No question in this application is intended to elicit information, other than required by law nor will any information obtained in response to any question be used in violation of any law.

APPLICATION DATE	DATE AVAILABLE FOR WORK	POSITION APPLIED FOR:		
		<input type="checkbox"/> Security Guard	<input type="checkbox"/> Patrol Driver	<input type="checkbox"/> Clerical/Office
LAST NAME		FIRST NAME		MIDDLE INITIAL
MAILING ADDRESS (STREET OR PO BOX)		CITY		STATE ZIP
HOME PHONE NO.	CELL PHONE	SOCIAL SECURITY NUMBER		DRIVERS LICENSE
EMPLOYMENT TYPE		DESIRED WAGE P/HR	Were you ever previously employed by this company?	
<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary			<input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date:	

List the names of any relatives or friends working for this organization:

NAME	RELATIONSHIP

WORK EXPERIENCE - LIST PRESENT AND FORMER EMPLOYERS - BEGINNING WITH THE MOST RECENT

FROM	TO	COMPANY NAME AND ADDRESS	PHONE
POSITION HELD		JOB DUTIES/DESCRIPTION	
SUPERVISOR NAME AND TITLE		LAST WAGE P/HOUR	REASON FOR LEAVING
FROM	TO	COMPANY NAME AND ADDRESS	PHONE
POSITION HELD		JOB DUTIES/DESCRIPTION	
SUPERVISOR NAME AND TITLE		LAST WAGE P/HOUR	REASON FOR LEAVING
FROM	TO	COMPANY NAME AND ADDRESS	PHONE
POSITION HELD		JOB DUTIES/DESCRIPTION	
SUPERVISOR NAME AND TITLE		LAST WAGE P/HOUR	REASON FOR LEAVING

May we contact the above employers?
 Yes
 No
 If "No", indicate which one(s) you do not wish us to contact:

Do you have a valid Guard Card?
 Yes
 No
 If "Yes", Licence Number: _____
 Expiration Date _____

Have you ever been convicted of a crime?
 Yes
 No
 If "Yes", please explain and describe in detail.

WHEN ARE YOU AVAILABLE TO WORK

<input type="checkbox"/> MONDAY	<input type="checkbox"/> TUESDAY	<input type="checkbox"/> WEDNESDAY	<input type="checkbox"/> THURSDAY	<input type="checkbox"/> FRIDAY	<input type="checkbox"/> SATURDAY	<input type="checkbox"/> SUNDAY
TIMES:	TIMES:	TIMES:	TIMES:	TIMES:	TIMES:	TIMES:

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EDUCATION

NAME	ADDRESS	YRS COMPLETED	DID YOU GRADUATE?
HIGH SCHOOL			
COLLEGE			Degree
COLLEGE			Degree
TRADE SCHOOL/OTHER			

Do you have any special training, certifications or other security clearances? Please describe:

MISCELLANEOUS INFORMATION

Can you verify your legal right to work in the U.S. by providing a birth certificate, passport, work visa, driver's license with social security card, proof of U.S. citizenship or by some other means? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you at least 18 years of age? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you able to perform the job for which you are applying? <input type="checkbox"/> YES <input type="checkbox"/> NO
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REFERENCES

NAME	PHONE	HOW MANY YEARS KNOWN

APPLICANT'S CERTIFICATION - Please read very carefully before signing.

I certify that the answers given by me to the questions on this application and the statements made by me in this application are correct and complete. I understand that, if I become employed, a misrepresentation or omission of fact in this application may result in my discharge of employment. I authorize Weinstein Security, Inc., as part of its evaluation of my suitability for employment, to contact all school officials, references, and my previous supervisors (except where noted not to) to secure information concerning my skills, and ability to perform the job for which I am applying for. I further acknowledge and agree that, if I am employed, I will be an at-will employee and Weinstein Security, Inc. may terminate my employment at any time and for any reason, or no reason at all, without prior notice.

APPLICANT'S SIGNATURE	DATE
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DO NOT WRITE BELOW - FOR COMPANY USE ONLY-

INTERVIEW DATE AND TIME	INTERVIEWED BY (PRINT NAME)
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COMMENTS: