

EMPLOYMENT APPLICATION

CALIFORNIA SECURITY SERVICES INC.

DBA

ELITE UNIVERSAL SECURITY

5548 Feather River Blvd

Olivehurst, California 95961

530-749-0280 Office 530-741-9194 Fax

PPO 14694

PLEASE PRINT APPLICATION

Full Name _____

Soc. Security # _____ - _____ - _____ Date Of Birth (Optional) _____

Address _____ Home Phone _____

City _____ State _____ Zip _____ Other Phone _____

How Long At Current Address _____

Previous Address(Es) For Past Five Years:

1) _____ Dates Lived There _____

2) _____ Dates Lived There _____

3) _____ Dates Lived There _____

4) _____ Dates Lived There _____

5) _____ Dates Lived There _____

In Emergency Notify _____

Relationship _____ Phone # _____

PERSONAL INFORMATION

Have You Ever Been Known By Any Other Name? Yes [] No []

If Yes, List Name(S) _____

Have You Ever Been Dismissed Or Asked To Resign From Any Job? Yes [] No []

If Yes, Give Name Of Employer And Explanation _____

Have You Ever Worked As A Peace Officer? Yes [] No []

If Yes Where? _____

Have You Ever Been Arrested And Charged With Any Crime (Adult or Juvenile)? Yes [] No []

If Yes, Give Date, Type of Crime, Place And Your Age _____

Are You Currently Awaiting Trial, Sentencing or Have An Arrest Warrant Pending? Yes [] No []

If Yes, Give Details _____

Have You Ever Served In The Armed Forces? Yes [] No []

If Yes Complete The Following Information: Branch _____ Rank _____

Dates of Service From _____ To _____ Length of Service _____

Type of Discharge _____

Have You Ever Applied For Workman's Compensation For Any Injury Received While Working (Past, Present, Pending)? Yes [] No [] If Yes, Explain _____

Do You Have Any Medical or Physical Limitations Which Would Impair Your Ability To Complete Your Duties As A Security Guard? Yes [] No [] If Yes, Explain _____

Have You Ever Been Bonded? Yes [] No [] Was A Bond Ever Refused? Yes [] No []

Do You Speak Any Foreign Languages And If So, State Language, Fluency, Reading And Writing Skills in Same _____

EDUCATION

<u>Name / Location of School</u>	<u>Years Attended</u>	<u>Year Graduated</u>
Grammar _____	_____	_____
High School _____	_____	_____
College _____	_____	_____
P.O.S.T. _____	_____	_____
Other _____	_____	_____

DRIVING HISTORY

Current California Drivers Lic # _____ Expiration Date _____

Are There Any Restrictions On Your Drivers License? Yes [] No []

If Yes, Explain _____

Have You Ever Received A Citation For A Driving Offense? Yes [] No []

If Yes, Explain _____

Have You Ever Paid A Fine Over \$499.00? Yes [] No []

If Yes, Explain _____

Do You Hold Any Out Of State Drivers Licenses? Yes [] No [] State _____

Do You Own A Car? Yes [] No []

Cards – Licenses – Permits

TYPE	NUMBER	EXPIRATION DATE
___ Guard Card	# _____	_____
___ Weapons Permit	# _____	_____
___ CPR Card	# _____	_____
___ First Aid Card	# _____	_____
___ Mace/Teargas Certificate	# _____	_____
___ Baton Permit	# _____	_____

IF PERMITTED TO CARRY A WEAPON PLEASE COMPLETE THE FOLLOWING:

Make _____ Model _____ Serial # _____
Make _____ Model _____ Serial # _____

Employment History (Most Recent First) For Previous Five Years

Have you ever been employed by Elite Universal Security? Yes [] No []

If so, When? _____

1. Employer _____
Address _____
Phone # _____ Position Held _____
From _____ To _____ Salary _____
Reason For Leaving _____

2. Employer _____
Address _____
Phone # _____ Position Held _____
From _____ To _____ Salary _____
Reason For Leaving _____

3. Employer _____
Address _____
Phone # _____ Position Held _____
From _____ To _____ Salary _____
Reason For Leaving _____

If any further space is needed, use the reverse side of this page.

Are you related to anyone who works for Elite Universal Security? Yes [] No []

If yes, State name of person and your relationship to them below

- _____
- _____
- _____

Personal References

Relatives and previous employers are NOT applicable as personal references. State the Names, Addresses and Telephone Numbers below.

- _____
- _____
- _____

Employment Specifics

What position are you interested in: _____

What hours per day are you available to work: _____

What days per week are you available to work: _____

What distances are you willing to travel: _____

I understand that I may be expected to work holidays, nights and weekends as required. _____ (Please initial)

**PLEASE READ AND MAKE SURE YOU UNDERSTAND THE FOLLOWING,
BEFORE YOU SIGN AND DATE THIS APPLICATION**

I hereby affirm that the foregoing answers are true without reservation. I further authorize Elite Universal Security and its officers and the officers of any company or person or firm by which I have been employed heretofore, to answer any and all inquiries as to my conduct and qualifications while in such services, and to state so far as they my know, the cause of my leaving the same and hereby release any and all such companies, firms and persons from any liability for damage of whatever nature, on account of furnishing information for use in determining my fitness for employment. I understand that I will be subject to dismissal if anything in this application is found to be untrue. I further understand that if I am employed, I am required to act honestly, legally and must abide by all rules and regulations of the company.

Should I be employed by Elite Universal Security, I hereby agree to the following conditions set forth by Elite Universal Security and its agents.

I further authorize that if I am employed by Elite Universal Security, and leave for any reason whatsoever, I will return any and all uniforms, equipment and manuals issued to me. If not I authorize Elite Universal Security to deduct any and all amounts owed from my final paycheck. _____ (Please initial)

At no time will I consume any illegal drugs. At no time will I consume any alcohol or any prescription drug which could impair my responses while on duty for a period of at least eight (8) hours prior to my assigned duties/shift. Should I be on prescribed drugs, I will provide to Elite Universal Security a letter from my physician stating that I am on prescribed drugs and that I am able to perform my duties safely. I also agree that I will fully consent to a drug/alcohol test which may be required for pre-employment and/or which may be required to perform my duties on a special job site to which I may be assigned to work. Further, should I be found on my job site unable to perform my duties due to possible use of drugs/alcohol, I also agree to any necessary tests required by Elite Universal Security or it's clients. Any costs incurred for the tests will be paid by Elite Universal Security, or the agency requesting the tests.

FAILURE TO COMPLY WITH THE ABOVE CAN AND WILL RESULT IN YOUR NOT BEING HIRED, OR IF EMPLOYED BY Elite Universal Security, IMMEDIATE TERMINATION.

Signature of Applicant/Employee

Date

California Security Services, Inc
DBA Elite Universal Security

Date

California Security Services Inc.
DBA



Universal Security

5548 Feather River Blvd
Olivehurst, California 95961
Phone: (530) 749-0280 Fax: (530) 741-9194
License # PPO 14694/Small Business & DVBE #0032131

Pre-employment Questionnaire – Guard

Name _____

Guard Card # _____ Exp Date _____

Did you receive your guard card AFTER July 1, 2004? Yes No

If Yes – When and where did you receive your training? _____

Have you received your 8-hour yearly continuous training? Yes No Certificate # _____

Facility Name - _____

Have you received your full (8) hours Phase one Training including Powers to Arrest Test and Weapons of Mass Destruction Module (4) Hours? Yes No Certificate # _____

Facility Name - _____

Have you received your full (8) hours Phase Two Training? Yes No Certificate # _____

Facility Name - _____

Have you received your full (8) hours Phase Two Training? Yes No Certificate # _____

Facility Name - _____

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA,
that the foregoing information is true and accurate to the best of my knowledge.

Applicant Signature

Date

Elite Representative

Date