

# Application for Employment



VARIOUS LAWS PROHIBIT DISCRIMINATION BASED ON RACE, COLOR, SEX, RELIGION, NATIONAL ORIGIN, ANCESTRY, AGE, DISABILITY, OR MARITAL STATUS. PARAGON SYSTEMS IS AN EQUAL OPPORTUNITY EMPLOYER. AND YOUR RESPONSE TO ANY QUESTIONS WILL NOT BE USED AS A BASIS FOR DISCRIMINATION, BUT WILL BE JUDGED ON ITS RELEVANCE TO THE POSITION YOU ARE SEEKING.

Date of Application \_\_\_/\_\_\_/\_\_\_

## Personal Information

Name: Last		First	Middle	Social Security Number	
Home Address			City	State	Zip
Home Phone No.	Alternate Phone No.	Are you legally authorized or permitted to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
		Are you over 21 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## Desired Employment

Position(s) & Locations applied for		Salary Requirements	Available start date
Type of Employment Desired	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Temporary
Can you travel if required? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are there any days, hours or locations that you are unavailable to work? Please list.		
Do you have a contractual agreement that could potentially limit your employment with Paragon Systems? If 'Yes', please identify.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any relatives that currently work for Paragon Systems? If 'Yes', please identify.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed elsewhere, attending school or training? If 'Yes', please identify.			<input type="checkbox"/> Yes <input type="checkbox"/> No

## Skills

Summarize special training, skills, licenses, certificates that may assist in performing the position for which you are applying.		
Do you presently hold a DOD/DOE clearance? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, what clearance level?		
First Aid Certification Card? <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration Date :	C.P.R. Certification Card? <input type="checkbox"/> Yes <input type="checkbox"/> No Expiration Date :	Are you currently GSA certified? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of Certification:
Please list the <b>SECURITY LICENSES</b> you presently hold, give the type of license, the issuing state and the expiration date.		

## Education

Type of School	Name and Location	Degree/Area of Study	# Years Attended	Graduated (Circle One)
High School	Name Address			Yes No
	City State Zip			
College (Undergraduate)	Name Address			Yes No
	City State Zip			
Graduate School	Name Address			Yes No
	City State Zip			
Other	Name Address			Yes No
	City State Zip			

## U.S. Military Service

Have you ever served in the U.S. Military?  Yes  No

(If yes) Please provide the following information regarding your military service:

Branch:	Years of Service:	Date of Military Separation:

After accepting an offer of employment, can you submit a copy of a DD form 214?  Yes  No

## Employment History

List employment for the past 5 years starting with your most **recent** position. Account for any time during this period that you were unemployed. Please indicate if you were employed under a different name. **This section must be completed even if you are attaching a resume.**

May we contact your present employer? (circle one) Yes No      May we contact your past employer? (circle one) Yes No

Dates	Name and Address of Employer	Position Held and Supervisor	List Major Duties	Salary or Wages	Reason for Leaving
From: _____/____/____ mo. yr.	Name Address                      City	Your Job Title Supervisor		Starting:  Final:	
To: _____/____/____ mo. yr.	Phone (   )				
From: _____/____/____ mo. yr.	Name Address                      City	Your Job Title Supervisor		Starting:  Final:	
To: _____/____/____ mo. yr.	Phone (   )				
From: _____/____/____ mo. yr.	Name Address                      City	Your Job Title Supervisor		Starting:  Final:	
To: _____/____/____ mo. yr.	Phone (   )				
From: _____/____/____ mo. yr.	Name Address                      City	Your Job Title Supervisor		Starting:  Final:	
To: _____/____/____ mo. yr.	Phone (   )				

## Background

Have you ever been convicted of a crime or received a verdict of anything other than not guilty in any criminal investigation or proceeding?

Yes  No

If 'Yes', describe when the conviction occurred, the facts and circumstances of any facts relating to disposition of the conviction.

(Do not list any criminal charges for which the records have been sealed or expunged. A criminal conviction will not necessarily bar employment.)

Are there any criminal charges currently pending against you?  Yes  No Answering 'Yes' to this question will not disqualify you from being considered for this position. If yes, attach a separate sheet explaining the charge(s).

Have you ever been fired, terminated or asked to resign from any employment?  Yes  No If yes, please identify employer and explain basis for termination.

**Professional References** (Do not list relatives; Past/Current Supervisors preferred. Please indicate if you were employed under a different name.)

Name	Title	Daytime Phone No.	Years Known

**Please Read Carefully**

I certify that all information I have provided in order to apply for and secure work with Paragon Systems is true, complete and accurate. I have not withheld any facts that might give Paragon Systems a reason not to hire me. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from Paragon Systems' service, whenever it is discovered. I understand that Paragon Systems will verify statements made by me in the application. I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not been notified by Paragon Systems and still wish to be considered for employment, it will be necessary for me to reapply and complete a new application. I understand that the federal government reserves the right to terminate or to refuse employment of any applicant or active employee working under any contract with Paragon Systems. I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand and agree that, if hired by Paragon Systems, my employment is at-will and that employment may be terminable at any time with or without cause, with or without prior notice, be either Paragon Systems or me. I further understand that although the terms and conditions of my employment with Paragon Systems may change, such changes will not affect the at-will employment relationship between me and Paragon Systems. I understand that this statement of the circumstances under which my employment can be terminated constitute the complete understanding between me and Paragon Systems. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of Paragon Systems is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by Paragon Systems' President. I understand that Paragon Systems has the right to search anything brought into the workplace, including desks, lockers, handbags, briefcases, and backpacks. I understand Paragon Systems' company benefits and rules and regulations may be changed, modified, deleted or added to the company at my time at the company's sol option and without prior notice. I acknowledge and agree that, at any time I am subjected to any type of discrimination or harassment, I will contact Paragon Systems' Human Resources or the President immediately to obtain assistance in the resolution of those matters. I agree that I will settle any and all claims, disputes or controversies arising out of or relating to my application or candidacy for employment, employment, or cessation of employment with the Company, exclusively by final and binding arbitration before a neutral Arbitrator under the American Arbitration Association's "National Rules for the Resolution of Employment Disputes". By way of example only, such claims include claims under federal, state, and local statutory or common law, the law of contract, and the law of tort.

Applicant's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_/\_\_\_\_/\_\_\_\_

Print Name: \_\_\_\_\_



# EMPLOYMENT APPLICATION

## EEO/AA ADDENDUM

Date:	Position applied for:		How did you hear about the Company?	
Name: Last	First	MI	Social Security Number:	
Address	City		State	Zip

This information requested below is collected solely to comply and monitor compliance with Executive Order 11246, as amended, Section 503 of the Rehabilitation Act of 1973, as amended, the Vietnam Era Veteran's Readjustment Act of 1974, as amended (38 U.S.C. § 4212).

**SUBMISSION OF THIS INFORMATION IS VOLUNTARY. YOU ARE NOT REQUIRED TO FURNISH THIS INFORMATION.**

**SEX** Check one:  Male  Female

**ETHNICITY**

- Hispanic:** A person of Cuban, Mexican, Puerto Rican, south or Central American, or other Spanish culture or origin regardless of race. **No need to select any other race if this selection is made.**

**Race**

**Check one:**

- Two or More Races (not Hispanic or Latino):** All persons who identify with more than one of the five races below. **No need to select any other race if this selection is made.**
- Asian (not Hispanic or Latino):** A person having origins in any of the original peoples of the Far East, Southeast Asian, or the Indian Subcontinent, including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaska Native (Not Hispanic or Latino):** A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Black (not Hispanic or Latino):** Persons having origins in any of the Black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (not Hispanic or Latino):** A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- White (Not Hispanic or Latino):** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**ARE YOU A VETERAN?**

- Veteran
- Not a Veteran
- I do not wish to provide this information

For Paragon Management Use Only

Volunteered  Not volunteered

If not volunteered: Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Upon completion, this document is to be detached by hiring personnel and kept in separate confidential file.