

EMPLOYMENT APPLICATION

Application information

Full name:					Date:			
	Last	First		М.І.				
Address:					Phone:			
	Street	address		Apt/Unit #				
					Email:			
-	City		State	Zip Code				
Date Available:		S.S. no:			Desired salary:	\$		
Position applied for:	1							
Do you currently possess a valid St. Louis County/St. Louis City Security License? Yes 🗆 No 🗆 (Circle One: Armed Unarmed)								
Do you currently	possess a valid Illinois P	ERC card? Yes	□ No □	(Circle One:	Armed Unarm	ed)		
Are you currently a commissioned Police Officer in the State of Illinois or State of Missouri and are actively working for a municipal or county agency? Yes D No D (Circle One: Illinois Missouri)								
Are you a citize	n of the United States?	? Yes □	No 🗆					
If no, are you au U.S.?	thorized to work in the	e Yes □	No 🗆					
Do you consent	to a background chec	k? Yes □	No 🗆					
Have you ever b	been convicted of a fel	ony? Yes □	No 🗆	If yes, explain:				

Education

High school:		Address:
From:	То:	Did you graduate? Yes D No D Diploma:
College:		Address:
From:	То:	Did you graduate? Yes 🗆 No 🗆 Degree:
Other:		Address:
From:	То:	Did you graduate? Yes D No D Degree:

References

Please list three professional references.	
Full name:	Relationship:
Company:	Phone:
Address:	Email:
Full name:	Relationship:
Company:	Phone:
Address:	Email:
Full name:	Relationship:
Company:	Phone:
Address:	Email:

Previous Employment

Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		То:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes 🗆	No 🗆	
Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		То:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes 🗆	No 🗆	
Company:	Phone:		
Address:	Supervisor:		
Job title:	From:		То:
Responsibilities:			
May we contact your previous supervisor for a reference?	Yes 🗆	No 🗆	
Military Service			
Branch:	From:		То:
Rank at discharge:	Type of discharge:		
If other than honorable, explain:			

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date:

Please return completed application and any additional documentation to: mmargaritis@metropublicsafetyinc.com