

# EMPLOYMENT / JOB APPLICATION

## Walton Investigations

4004K Spring Garden Street, Greensboro, NC 27407

336-908-4625 waltonpi.com

### PERSONAL INFORMATION – PLEASE PRINT CLEARLY

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
First Middle Last

ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite

\_\_\_\_\_ City State Zip Code

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

SOCIAL SECURITY NUMBER (SSN): \_\_\_\_ - \_\_\_\_ - \_\_\_\_

#### EMERGENCY CONTACT:

NAME: \_\_\_\_\_ PHONE \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

DATE AVAILABLE: \_\_\_\_\_ DESIRED PAY: \$ \_\_\_\_\_ per hour

POSITION APPLIED FOR: Security Officer Unarmed  Armed

ARE YOU CURRENTLY, OR HAVE BEEN WITH IN THE LAST 10 YEARS A NC PPSB REGISTERED SECURITY OFFICER? Unarmed  Armed

EMPLOYMENT DESIRED: Full-Time  Part-Time

### EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S?  Yes  No\*

HAVE YOU EVER WORKED FOR US?  Yes\*  No

\*IF YES, WRITE THE START AND END DATES: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY?  Yes\*  No

\*IF YES, PLEASE EXPLAIN: \_\_\_\_\_

### BACKGROUND/DRUG/CREDIT CHECK CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK?  Yes  No

IF ASKED, ARE YOU WILLING TO CONSENT TO A CREDIT CHECK?  Yes  No

IF ASKED ARE YOU WILLING TO CONSENT TO A DRUG TEST?  Yes  No



## MILITARY SERVICE

ARE YOU A VETERAN?  YES  NO FROM: \_\_\_\_\_ TO: \_\_\_\_\_

BRANCH: \_\_\_\_\_ RANK AT DISCHARGE: \_\_\_\_\_

TYPE OF DISCHARGE: \_\_\_\_\_

IF NOT HONORABLE, PLEASE EXPLAIN: \_\_\_\_\_

DO YOU HAVE A COPY OF YOUR DD214?  YES  NO

## EDUCATION

HIGH SCHOOL: \_\_\_\_\_ CITY / STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ GRADUATE?  YES  NO DIPLOMA: \_\_\_\_\_

COLLEGE: \_\_\_\_\_ CITY / STATE/ZIP: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ GRADUATE?  YES  NO DEGREE: \_\_\_\_\_

OTHER: \_\_\_\_\_ CITY / STATE/ZIP: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ DEGREE/CERTIFICATION: \_\_\_\_\_

OTHER: \_\_\_\_\_ CITY / STATE/ZIP: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ DEGREE/CERTIFICATION: \_\_\_\_\_

## PREVIOUS EMPLOYMENT

EMPLOYER 1: \_\_\_\_\_  
Company / Individual

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite

City State Zip Code

STARTING PAY: \$ \_\_\_\_\_  HOUR  SALARY ENDING PAY: \$ \_\_\_\_\_  HOUR  SALARY

JOB TITLE: \_\_\_\_\_ RESPONSIBILITIES: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_



**EMPLOYER 2:** \_\_\_\_\_  
Company / Individual\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite

\_\_\_\_\_ City State Zip Code

STARTING PAY: \$ \_\_\_\_\_  HOUR  SALARY ENDING PAY: \$ \_\_\_\_\_  HOUR  SALARY

JOB TITLE: \_\_\_\_\_ RESPONSIBILITIES: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

**PROFESSIONAL REFERENCES**

**FULL NAME:** \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
First Last

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

**FULL NAME:** \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_  
First Last

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

**DISCLAIMER**

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered. Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**PRINT NAME** \_\_\_\_\_

