



**PROTECTIVE SERVICES**

**Employee Application**



**EDUCATION**

Type of School	Name of School and Address	Courses Majored In	Last Year Complete	Graduate
High School			1 2 3 4	Yes No
College			1 2 3 4	Yes No
Technical and Other			1 2 3 4	Yes No

**EMPLOYMENT HISTORY**

*Please include all employment for the last five years  
(List most recent employment first and work back in time)*

**Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Dates of Employment (month/year):** From \_\_\_\_\_ to \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Brief Description of Duties:**  
\_\_\_\_\_  
\_\_\_\_\_

**No. of Persons Supervised (if applicable):** \_\_\_\_\_

**Hours Worked Per Week:** \_\_\_\_\_ **Salary (current or final):** \_\_\_\_\_ *per* \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Reason For Leaving:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Dates of Employment (month/year):** From \_\_\_\_\_ to \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Brief Description of Duties:**  
\_\_\_\_\_  
\_\_\_\_\_

**No. of Persons Supervised (if applicable):** \_\_\_\_\_

**Hours Worked Per Week:** \_\_\_\_\_ **Salary (current or final):** \_\_\_\_\_ *per* \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Reason For Leaving:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Dates of Employment (month/year):** *From* \_\_\_\_\_ *to* \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Brief Description of Duties:**

\_\_\_\_\_

**No. of Persons Supervised (if applicable):** \_\_\_\_\_

**Hours Worked Per Week:** \_\_\_\_\_ **Salary (current or final):** \_\_\_\_\_ *per* \_\_\_\_\_

**Supervisor Name:** \_\_\_\_\_ **Reason For Leaving:** \_\_\_\_\_

Use a separate sheet to list additional employers, if necessary. We may contact the employers listed on this application unless you specifically exclude them below. Please list any employers you do not want us to contact and your reason for the exclusion:

\_\_\_\_\_  
*Employer's Name*

\_\_\_\_\_  
*Reason*

Have you entered into any agreements with any former employer (for example, an agreement not to compete or confidentiality agreement) that would impact your ability to do work for this Company? \_\_\_\_\_ *Yes* \_\_\_\_\_ *No*

### SPECIAL KNOWLEDGE AND SKILLS

List your special knowledge and skills and any equipment that you can operate.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DRIVING INFORMATION**

Do you currently possess a current and valid driver's license? \_\_\_\_\_ *Yes* \_\_\_\_\_ *No*  
*If yes, please list the following:*

NAME	TITLE	FIRM & ADDRESS	TELEPHONE	RELATIONSHIP TO YOU
1.				
2.				
3.				

*Driver's License No.:* \_\_\_\_\_ *State:* \_\_\_\_\_ *Exp. Date:* \_\_\_\_\_

Have you had any points or major traffic violations in the last 5 years?

*If yes, please explain:*

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**Transportation (circle):**    Vehicle                      Bus                      Metro                      Walk

**REFERENCES**

*Please list three (3) references other than your former employers or relatives.*

If hired, I agree to conform to the rules and regulations of PCHANGE PROTECTIVE SERVICES. I understand that no management representative has any authority to enter into any agreement for employment for a specific period of time, and that my employment is at will and may be terminated at any time at the option of either the Company or myself.

I hereby authorize PCHANGE PROTECTIVE SERVICES to conduct an investigation concerning all statements contained in my application for employment, to interview all employers and to conduct any other investigation that it deems appropriate. I request any duly constituted law enforcement agency or judicial officer to furnish the Company with all information pertaining to me concerning un-expunged convictions and I hereby release PCHANGE PROTECTIVE SERVICES and any law enforcement agency, judicial or other individual from any liability arising from disclosure of such information pertaining to me which is obtained during said investigation.

**UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.00.**

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I hereby affirm that my statements and answers to all questions on this application are true and correct and that I have not knowingly withheld any fact or circumstance which, if disclosed, would affect my application unfavorably. I understand that if employed, any misstatement or omission of fact on this application may result in my immediate dismissal.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_