

At Down East Protection Systems (hereinafter “DEPS”), we are looking for talented individuals to become part of the DEPS team; specifically, persons who will support our company as we strive to expand our business within Eastern North Carolina’s safety and security field. Individuals must have desire and talent to perform their responsibilities with both integrity and ingenuity that will set them apart from the average employee.

We have developed this application to help both you and DEPS determine if you have the qualities and determination to become a part of our team. After completing the application, please submit it to:

**DEPS**

**2006 North Queen Street Kinston, NC 28501**

**ATTN: DEPS Recruiter**

We will review your application and based on the information you provide, we may contact you regarding a personal interview.

Thank you for your time and interest in becoming a team member of DEPS.



# Application for Employment

It is the policy of Down East Protection Systems to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status. No question on this application is intended to secure information to be used for such discrimination. Proof of identity and work authorization will be required upon employment in accordance with federal regulations. **DEPS intends to confirm and hold you responsible for the accuracy of the statements you make on this application.** This application will remain on file for a period of ninety days. If I have not heard from DEPS within ninety days and wish to receive further consideration for employment, it will be necessary to complete an additional application. **If this application is not completed in full, I understand that I will not be considered for employment with DEPS, an Equal Opportunity Employer.**

**Applicant Data (please print)**

Full Legal Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you 18 years or older: Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a United States citizen? Yes \_\_\_\_\_ No \_\_\_\_\_\_

If no, are you authorized to work in the United States? Yes \_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a criminal offense (misdemeanor or felony): Yes \_\_\_\_\_\_ No \_\_\_\_\_\_\_

If yes, please explain

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

(A “yes” answer to this question does not necessarily preclude consideration for employment)

**Education**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type of  School | Name of School  And Location | Last Year Completed | Course of Study | Did you Graduate ? | Degree  (ex: AAS Business  Admin) |
| High School |  | 9 10 11 12 |  |  |  |
| Trade School |  |  |  |  |  |
| College |  | 1 2 3 4 |  |  |  |
| Graduate  School |  | 1 2 3 4 |  |  |  |

**Employment Data**

Job applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Desired Salary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever applied for employment with DEPS before? Yes \_\_\_\_ No \_\_\_\_

When:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever worked for DEPS before? Yes \_\_\_\_ No \_\_\_\_

When:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Are you available to work: \_\_\_\_ Full-time \_\_\_\_\_ Part-time

\_\_\_\_ Overtime \_\_\_\_ Weekends \_\_\_\_ Holidays

Any day of the week?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If not, when are you available? Sun Mon Tues Wed Thu Fri Sat

When can you begin work? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did a current DEPS employee refer you to us? Yes \_\_\_\_ No \_\_\_\_

If so, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you able to perform the essential functions of the job with or without reasonable accommodations?

Yes \_\_\_ No \_\_\_\_

**Employment History: please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.**

|  |  |  |
| --- | --- | --- |
| **1** | **Company Name** | **Telephone** |
| **Address** | **Employed-(State month and year)**  **From: To:** |
| **Name of Supervisor** | **Weekly pay**  **Start: Last:** |
| **State Job Title and Describe Your Work** | **Reason for leaving** |
| **2** | **Company Name** | **Telephone** |
| **Address** | **Employed-(State month and year)**  **From: To:** |
| **Name of Supervisor** | **Weekly pay**  **Start: Last:** |
| **State Job Title and Describe Your Work** | **Reason for leaving** |
| **3** | **Company Name** | **Telephone** |
| **Address** | **Employed-(State month and year)**  **From: To:** |
| **Name of Supervisor** | **Weekly pay** |
|  |  | **Start: Last:** |
| **State Job Title and Describe Your Work** | **Reason for leaving** |
| **4** | **Company Name** | **Telephone** |
| **Address** | **Employed-(State month and year)**  **From: To:** |
| **Name of Supervisor** | **Weekly pay**  **Start: Last:** |
| **State Job Title and Describe Your Work** | **Reason for leaving** |

**We may contact the employers listed above unless you indicate those you do not want us to contact.**

|  |
| --- |
| **Do Not Contact** |
| **Employer Number(s):**  **Reason:** |

**Relatives working for DEPS**

Name Relationship

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

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

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

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

**Military**

Branch of Service:

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

Dates in Service: From (mo/yr) - To (mo/yr)

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

Duties in the service (include schools and training):

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_**

**Special Skills/Certifications**

What knowledge, special technical or computers, and/or other qualifications/certifications have you acquired from employment or other experience? Include any specific equipment that you proficiently operate.

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

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

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

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

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

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

**References**

List five (5) references that are not relatives and have known you for at least five years. One must be a former employer.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***Name*** | ***Occupation*** | ***Years***  ***Known*** | ***Phone*** | ***Address*** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

## Affidavit

I authorize DEPS to examine my references, employment records, education records, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and professional experiences with them. I release the Company, former employers, references, and all other persons, corporations and associations from any and all claims, demands, or liabilities arising out of or in any way related to such examination.

I hereby certify that the above information is truthful and accurate. I understand that falsification of any information on this application or resume and/or refusing to provide requested information may prevent me from being hired or lead to my dismissal if hired.

I understand that proof of identity and work authorization will be required upon employment in accordance with federal regulations. In the event of my employment with DEPS, I agree to abide by all present and future issued rules of the Company.

As part of the application process with DEPS, I understand that I may be subject to random criminal, civil, driving, background checks and/or drug screening. If any of these investigations/checks reveal any negative information, I understand I may be denied employment.

Applicant Signature:

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

\_\_

Date:

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

\_\_\_

## Information / Disclosure Release

The purpose of this agreement is to inform you that as part of our procedure for processing your employment application, our agency will conduct an investigative report. The report may include Criminal Background search, Driving Record check, and a Credit Report. By signing this document, you are releasing any and all persons, companies, agencies, or others from liability resulting from your investigative report.

**Please type or print all information:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_**

Last name First name Middle name

Maiden name

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

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

Social Security # Date of Birth Sex Race

|  |  |  |
| --- | --- | --- |
| ***Current Address***  \_\_\_\_\_\_\_\_\_  Drivers License # | ***Street City State***  State Expiration date  ***Zip*** | ***Years:***  ***Months:*** |
| ***Previous***  ***Address*** | ***Street City State***  ***Zip*** | ***Years:***  ***Months:*** |
| ***Previous***  ***Address*** | ***Street City State***  ***Zip*** | ***Years:***  ***Months:*** |
| ***Previous***  ***Address*** | ***Street City State***  ***Zip*** | ***Years:***  ***Months:*** |

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

***Note: Indicate below, where you have lived for the past ten years***

**Applicant Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**For Office Use Only:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_ Statewide Criminal Records: Education**

**Verification\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**States to search: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_ Countrywide Criminal Records: Employment Verification\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**States to search: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Federal Criminal Records: Personal References\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**States to search: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SS# Verification**  **Report\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **DMV** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Credit Card Report** | **Address Verification\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Verification**

**Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**