** Dark Ridge Security Group**

**#1 Sunset Plaza Court**

**Roswell, NM 88203**

575-578-0409

# Equal Employment Opportunity Form

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | **Applicant Information**  |  |
| Full Name:  Address:    |   |   |   |
| *Last*   | *First*   | *M.I.*   |
| *Street Address*   |   | *Apartment/Unit #*   |

 *City State ZIP Code*

Home Phone: ( ) Social Security Number:

How long at this address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position Applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact: Name, Number, Address and Relationship to you. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

## Voluntary Information

*This information is being requested in accordance with federal regulations. The information is voluntary and will not be used when considering you for employment with our company.*

**Racial or Ethnic Group**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ American Indian/Alaskan  | ☐  | Asian/Pacific Islander  | ☐  | Black/African American  |
| ☐ Hispanic/Latino  **Gender**  | ☐  | White/Caucasian  | ☐  | Other  |
| ☐ Female  **Military Service**  | ☐  | Male  |   |  |
| ☐ Pre-Vietnam Era  | ☐  | Vietnam Era  |   |  |
| ☐ Post-Vietnam Era  | ☐  | Disabled Veteran  |   |  |

**Indicate hours that you can work.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ☐  | Full time  | ☐  | Part time  | ☐  | Temporary  |
| ☐   |  morning  | ☐  | morning  | ☐  | morning  |
| ☐  | evening  | ☐  | evening  | ☐  | evening  |
| ☐  |  nights  | ☐  | nights  | ☐  | nights  |

|  |  |  |  |
| --- | --- | --- | --- |
|  Date available to begin to work \_\_/\_\_/\_\_\_  Are you willing to work hours other than 8am-5pm?      YES ☐ NO   What days are you unable work ?     Sun Mon Tue Wed Thu Fri Sat ☐  ☐ ☐ ☐ ☐ ☐ ☐               Are you willing to travel?  Yes ☐ No ☐    Do you have a valid driver’s license? Yes ☐ No ☐  List all the traffic violations in the past 3 years and briefly describe.

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 Are you at least 18 years of age? ☐YES ☐NO  Have you ever been convicted of a felony or subjected to a deferred Adjudication on a felony charge? ☐ YES ☐ NO  Have you ever been convicted or arrested for a petty misdemeanor or misdemeanor in the last 20 years?  ☐ YES ☐ NO Are you on probation of any type? ☐ YES ☐ NO If your answer is “Yes” to either, explain in concise detail on a separate piece of paper or explain via email if application is sent by email, giving the dates and nature of the offense, the name and location of the court, and the disposition of the case(s). **A conviction may not disqualify you, but a false statement will.** Note: Some state agencies may require additional information related to convictions of misdemeanors  |

**EDUCATION**

 (NOTE: Applicants may be required to provide proof of diploma, degree,

Transcripts, licenses, certifications, and registrations.) Indicate Highest Grade

Completed:

 Did you graduate from high school? ☐ YES ☐ NO

 If you did not graduate from High School, did you receive a GED?

☐ YES ☐ NO

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| --- | --- | --- | --- | --- | --- |
| **TYPE OF** **SCHOOL**  | **NAME OF SCHOOL**  | **DATES ATTENDED** **FROM TO** **MO YR MO YR**  | **DATE** **GRADUATED** **OR EXPECTED** **TO GRADUATE**  | **TYPE OF** **DIPLOMA** **OR DEGREE**  | **MAJOR OR** **MINOR** **FIELD OF** **STUDY**  |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
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Special Training/Skills/Qualifications: List all job related training or skills you possess and machines or office equipment you can use, such as calculators, printing or graphics equipment, computer equipment, types of software and hardware. (Attach additional page, if necessary

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Have you ever been employed by Dark Ridge Security services?

☐ YES ☐ NO

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If you have been previously employed by Dark Ridge Security services, please list the date:

MILITARY SERVICE (A copy of a report of separation from the Armed Services may be required.) Are you a veteran? ☐ YES ☐ NO

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|   |

If yes, list type of discharge status dates of service

Date: from/ TO

|  |  |
| --- | --- |
|   |   |

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| --- |
| Please list all continuing education certificates you currently hold:  |
| **Course Title**  | **Date**  | **Course Number**  | **School Number**  |
|   |   |   |   |
|   |   |   |   |
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|   |   |   |   |

EMPLOYMENT HISTORY

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experience should clearly describe your qualifications.

1. **Include ALL employment. Begin with your current or last position and work back to your first.**
2. Employment history should include each position held, even those with the same employer. Include ALL employment. Begin with your current or last position and work back to your first.
3. EMPLOYER ADDRESS MUST BE COMPLETE MAILING ADDRESSES, INCLUDING ZIP CODE.
4. Give a brief summary of the technical and, if appropriate, the managerial responsibilities of each position you have held.
5. For supervisory/managerial positions, indicate the number of employees you supervised.

If you need additional space to adequately describe your employment history, please ask for another employment history sheet or attach a typed employment history providing the same information in the same format as this application form.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Employer:**  |  | **Immediate** **supervisor** **name** **Title:**  |   |  |
|   |
| **Position Title:**  |  | **Supervisor’s tel.**  |
| **Employer mailing address:**  |  | **Ffull time?**  ☐ **YES** ☐ **NO**  |
| **City & state Zip:**  |  | **Part time?**  ☐ **YES** ☐ **NO**  |
| **Employer Telephone No.**  |  | **Temporary?**  ☐ **YES** ☐ **NO**  |
| **May we contact?** ☐ YES☐ NO |   | **lllllll** **Dates of Employment:****Start date: End date:**  |

**Reason for Leaving:**

##  SUMMARY OF EXPERIENCE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Employer:**  |  |  | **Immediate** **supervisor** **name** **Title:**  |   |  |
|   |
| **Position Title:**  |  |  | **Supervisor’s tel.**  |
| **Employer mailing address:**  |  |  | **Ffull time?**  ☐ **YES** ☐ **NO**  |
| **City & state Zip:**  |  |  | **Part time?**  ☐ **YES** ☐ **NO**  |
| **Employer Telephone No.**  |  |  | **Ttemporary?**  ☐ **YES** ☐ **NO**  |
| **May we** ☐ YES **contact?**   | ☐  | NO  |  **Dates of Employment:****Start date: End date:**  |

 **Reason for Leaving:**

##  SUMMARY OF EXPERIENCE

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  **Employer:**  |  |  | **Immediate** **supervisor name** **Title:**  |   |  |
|   |
| **Position Title:**  |  |  | **Supervisor’s tel.**  |
| **Employer mailing address:**  |  |  | **Ffull time?**  ☐ **YES** ☐ **NO**  |
| **City & state Zip:**  |  |  | **Part time?**  ☐ **YES** ☐ **NO**  |
| **Employer Telephone No.**  |  |  | **Temporary?**  ☐ **YES** ☐ **NO**  |
| **May we** ☐ YES **contact?**   | ☐  | NO  | **Dates of Employment:****Start date: End date:** |

**Reason for Leaving:**

##  SUMMARY OF EXPERIENCE

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND**

**ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED**

1. I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination.
2. I understand that completion of this Application for Employment does not guarantee that I have been employed by Dark Ridge Security Services. I understand that all job offers may be conditional upon satisfactory completion of a background check, criminal history check, drug screen, and physical exam. I hereby consent to all of these tests and checks. I further understand that final approval of any job offer is made by Dark Ridge Security Services after completion of these tests and that until such final approval is made, I do not have a firm job offer to work as an employee of Dark Ridge Security Services.
3. I understand that all employees are employed at the will of Dark Ridge Security Services for an indefinite period and are subject to termination at any time, for any lawful reason, with or without cause or notice. At the same time, I understand that I may terminate my employment at any time and for any reason. I understand that no representative of Dark Ridge Security Services, other than the representative has the authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

4. I understand that within 3 days of starting employment with Dark Ridge Security Services, I will have to provide valid documents that verify my identity and my eligibility to legally work in the United States. If I do not provide such documentation by the third day of employment, I understand that my employment will be terminated.

5. I understand that Dark Ridge Security Services, check with the New Mexico Department of Public Safety, the Federal Bureau of Investigation or other organizations, for any criminal history in accordance with applicable statutes.

6. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you.

7. I understand that there will be a (6) six month orientation period of employment if I am hired by Dark Ridge Security services. I acknowledge that completion of an orientation period or conferral of regular status does not change my status as an employee-at-will or in any way restrict Dark Ridge Security Services’ right to terminate me or change the terms or conditions of employment.

**By signing this, I certify that I have read, understood and agreed to the conditions outlined in this applicant’s statement and that every piece of information I have provided on this application is true and correct to the best of my knowledge. I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably.**

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| --- |
|  **Signature:** |
| **Printed Name: Date:**   |