



**Shamar Executive Protection Services LLC**  
**Phone: (360) 912-6026 E-mail: info@shamarexecutiveprotection.com**

## Employment Application

### General Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Last, First, MI

Address: \_\_\_\_\_ Apartment/Unit # \_\_\_\_\_  
 Street  
 \_\_\_\_\_  
 City State Zip

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Position Applying for: \_\_\_\_\_

Full Time      Part Time      Both

Date available: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Please select your availability below:

	Day Shift	Night Shift	Any Shift
Sunday			
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			

Are you willing and able to work weekends and holidays?      Yes      No

Are you authorized to work in the U.S.      Yes      No

Do you have a driver's license?      Yes      No

Have you ever worked for this company?      Yes      No      If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony?      Yes      No

If yes, explain: \_\_\_\_\_

**Education**

High School: \_\_\_\_\_ Address: \_\_\_\_\_

Number of Years Attended: \_\_\_\_\_ Did you Graduate? Yes No Diploma GED

College: \_\_\_\_\_ Address: \_\_\_\_\_

Number of Years Attended: \_\_\_\_\_ Did you Graduate? Yes No Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

Number of Years Attended: \_\_\_\_\_ Did you Graduate? Yes No Degree: \_\_\_\_\_

**References**

*Please list 3 professional references*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of Years Known: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of Years Known: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Number of Years Known: \_\_\_\_\_ Email: \_\_\_\_\_

**Employment History**

*Most recent first*

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$\_\_\_\_\_ Ending Salary: \$\_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this supervisor?      Yes      No      Is this your current employer?      Yes      No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$\_\_\_\_\_ Ending Salary: \$\_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this supervisor?      Yes      No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$\_\_\_\_\_ Ending Salary: \$\_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this supervisor?      Yes      No

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$\_\_\_\_\_ Ending Salary: \$\_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this supervisor?      Yes      No

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Occupation: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

**Training & Skills**

Have you completed an executive protection training course or other body guard training?      Yes      No

If yes, which one? \_\_\_\_\_

Where: \_\_\_\_\_

List any other skills or qualifications related to the position: \_\_\_\_\_

\_\_\_\_\_

**Training & Skills**

Do you currently have a valid CPR Certification?      Yes      No

If you don't, are you willing to obtain one (at your own expense) prior to employment.      Yes      No

*I certify that the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal. As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references. If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to a sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.*

Signature: \_\_\_\_\_

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