

# Thomas Protective Service, Inc.

An Equal Opportunity Employer

## Application for Employment



Last Name						First		M.I.	Date		
Street Address							Apartment/Unit #				
City				State		ZIP					
Phone			Cell Phone, E-mail								
Date available:			Social Sec. #				Driver's Lic. #, State				
Position applying for:											
Are you a citizen of the United States?			YES	NO	If no, are you authorized to work in the U.S.?			YES	NO		
Have you ever worked for this company?			YES	NO	If so, when?						
Have you ever been convicted of a felony?			YES	NO	If so, explain:						
Have you ever been convicted of a misdemeanor?			YES	NO	If so, explain:						
Are you at least 18 years of age?			YES	NO	If no, explain:						
Are you available for full-time work?			YES	NO	If no, explain:						
Do you currently have a security license?			YES	NO	If yes, explain:						
Have you ever been arrested?			YES	NO	If yes, explain:						
Will you work overtime when requested?			YES	NO	If no, explain:						
Can you work on holidays?			YES	NO	If no, explain:						
Special Training/Skills:											

**The following information is needed for a legally permissible reason, including, without limitation, national security considerations, legitimate occupation qualifications, and/or business necessity.**

What is your legal gender?	Male	Female
Are you addicted to, or do you abuse drugs and/or alcohol?	YES	NO
Do you currently have any warrants for your arrest?	YES	NO
Have you ever been found to be mentally incompetent by a court of law?	YES	NO
Country where born:		

**Previous Employment** *(Please furnish accurate and complete information. Start with your present or most recent employer.)*

Company		Phone (      )
Address		Supervisor:
Job title:	Starting salary: \$	Ending salary: \$
Responsibilities:		
From:	To:	Reason for leaving:

Company		Phone (      )
Address		Supervisor:
Job title:	Starting salary: \$	Ending salary: \$
Responsibilities:		
From:	To:	Reason for leaving:

Company		Phone (      )
Address		Supervisor:
Job title:	Starting salary: \$	Ending salary: \$
Responsibilities:		
From:	To:	Reason for leaving:

Company		Phone (      )
Address		Supervisor:
Job title:	Starting salary: \$	Ending salary: \$
Responsibilities:		
From:	To:	Reason for leaving:

## Education

High School		Address		
From	To	Did you graduate?	YES    NO	Degree:
College		Address		
From	To	Did you graduate?	YES    NO	Degree:
Other		Address		
From	To	Did you graduate?	YES    NO	Degree:

## Miscellaneous

Names of friends working for Thomas Protective Service, Inc.:
Names of relatives working for Thomas Protective Service, Inc.:
Professional organizations you are a member of:

## Military Service

Branch:	From:	To:
Rank at discharge:	Type of discharge:	
If other than honorable, explain:		
Training received:		

## Disclaimer and signature

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate release.*

*I understand that acceptance of an offer of employment does not create a contractual obligation upon Thomas Protective Service, Inc. to employment in the future.*

*I understand that the state entity to which I am required to register as a security officer as well as Thomas Protective Service, Inc. may and/or will perform a criminal history background check before a security license can be obtained. In addition, I understand that continued employment, if offered and accepted, will rely upon a clean criminal record in the future.*

*I also authorize Thomas Protective Service, Inc. to contact my former employers for reference as to my abilities to perform the job function.*

Signature	Date
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**How to submit your application:** You may print out, complete and sign this application and return to us via the USPS to:  
**Thomas Protective Service, Inc. • P.O. Box 883 • Kaufman, TX 75142-0883**  
 OR, you may complete the application electronically and email it to us. Simply download the PDF, enter the proper information in the form fields of the PDF, provide your digital signature and, via the "Save as..." command in Acrobat, save the PDF as "TPSapp(your name).pdf".  
 Please email the completed PDF to [wendy@thomasprotective.com](mailto:wendy@thomasprotective.com)