



P.P.O. # 119709

# Knowles Security, Inc.

## PRE-EMPLOYMENT QUESTIONNAIRE

### Applicant Information

Date:	First Name:	Middle Name:	Last Name:
Street Address:		City, State, Zip Code:	Phone Number: Alternate Phone:
Date of Birth:	Place of Birth:	CA Driver's License or I.D.	Social Security:
Email:	Are you legally eligible to work in the U.S.? Yes ___ No ___		Have you ever been convicted of a felony? Yes ___ No ___
Have you served or are currently serving in the United States military?  Yes ___ No ___	In order to assist veterans in their transition from military service to civilian employment, BSIS has implemented the Veterans Come First Program which offers priority services to veteran applicants. Disclosure of military service is voluntary and participation in the program is optional. If you choose to use the Veteran's Come First Program, check the military status box and submit proof of military service (e.g. DD-214, DD-256, V-MET record, military orders, military I.D., etc.) along with your application.		
Do you have a valid guard card? Yes ___ No ___			
If selected for employment are you willing to submit to a background check? Yes ___ No ___			

Availability: Check all the days and shifts you are able to work.

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Day Shift							
Swing Shift							
Grave Shift							

### Questionnaire

Position applying for:	Salary desired:	Are you employed now? Yes ___ No ___	If employed, may we inquire of your present employer? Yes ___ No ___
Have you ever applied before with our company? Yes ___ No ___ If yes, when? _____			Do you have Security Experience? Yes ___ No ___
Do you have a vehicle? Yes ___ No ___	How far are you willing to travel? _____ Miles		Are you willing to submit to a drug test? Yes ___ No ___
Are you willing to submit to a polygraph test? Yes ___ No ___	Do you have any felonies or misdemeanors? Yes ___ No ___		Are you currently on bail? Yes ___ No ___
Do you currently have any lawsuits pending? Yes ___ No ___	Are you currently receiving/or have received workers compensation benefits? Yes ___ No ___		

