



**EMPLOYMENT**

PLEASE GIVE AN ACCURATE AND COMPLETE EMPLOYMENT RECORD. START WITH YOUR PRESENT OR MOST RECENT EMPLOYER.

Company Name:	Employed from _____ to _____
Address:	Telephone:
Job Title and Brief Description:	Salary: Beginning _____ Ending _____
Supervisor's Name	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	

Company Name:	Employed from _____ to _____
Address:	Telephone:
Job Title and Brief Description:	Salary: Beginning _____ Ending _____
Supervisor's Name	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	

Company Name:	Employed from _____ to _____
Address:	Telephone:
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Supervisor's Name	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	

Company Name:	Employed from _____ to _____
Address:	Telephone:
Job Title and Brief Description:	Salary: Beginning _____ Ending _____
Supervisor's Name	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	

PLEASE EXPLAIN ANY PERIODS OF UNEMPLOYMENT LONGER THAN 30 DAYS: \_\_\_\_\_

**DRIVING HISTORY:** (FOR ALL ARMORED, STORAGE AND COURIER APPLICANTS)

DO YOU HAVE A VALID CLASS D (OR HIGHER) DRIVER'S LICENSE?  YES  NO

FROM WHAT STATE? \_\_\_\_\_

IF YOU HAVE HELD A LICENSE IN ANY OTHER STATE DURING THE LAST 5 YEARS, PLEASE PROVIDE THE FOLLOWING INFORMATION:

DATES		STATE
FROM _____	TO _____	_____
FROM _____	TO _____	_____

HAVE YOU BEEN CONVICTED OF DRIVING WHILE IMPAIRED OR UNDER THE INFLUENCE OF ALCOHOL AND/OR DRUGS WITHIN THE LAST 5 YEARS?  YES  NO IF YES, GIVE EXPLANATION (S) AND DATE (S):

HAVE YOU REFUSED TO SUBMIT TO A BLOOD ALCOHOL CONTENT (BAC) TEST WITHIN THE LAST 5 YEARS?  YES  NO IF YES, GIVE EXPLANATION(S) AND DATE(S):

HAVE YOU BEEN CONVICTED OF RECKLESS DRIVING, OR LEAVING THE SCENE OF AN ACCIDENT, OR COMMITTING A FELONY INVOLVING A VEHICLE WITHIN THE LAST 5 YEARS?  YES  NO IF YES, GIVE EXPLANATION(S) AND DATE(S):

PLEASE LIST ALL MOVING VIOLATIONS RECEIVED WITHIN THE LAST FIVE (5) YEARS, **REGARDLESS** OF SEVERITY:

HAVE YOU BEEN INVOLVED IN ANY AT FAULT ACCIDENTS WITHIN THE LAST 5 YEARS?  YES  NO PLEASE LIST DATES AND GIVE DETAIL ON EACH INCIDENT:

**GENERAL INFORMATION:**

PLEASE LIST ANY ADDITIONAL INFORMATION/TRAINING THAT RELATES TO YOUR ABILITIES TO PERFORM THE JOB FOR WHICH YOU ARE APPLYING? \_\_\_\_\_

HAVE YOU EVER BEEN FIRED FROM A JOB OR FORCED TO RESIGN:  YES  NO IF YES, PLEASE EXPLAIN

HAVE YOU EVER WORKED FOR GRANITE CITY ARMORED CAR BEFORE?  YES  NO

HOW WERE YOU REFERRED TO OUR ORGANIZATION? \_\_\_\_\_

ARE YOU 18 YEARS OF AGE OR OLDER?  YES  NO

(This information is necessary to allow us to comply with state and federal regulations regarding the hiring of minors.)

IF APPLYING FOR AN ARMORED POSITION, ARE YOU 21 YEARS OF AGE OR OLDER?  YES  NO

(You must be 21 years or older to obtain and maintain a permit to carry, which is an essential function of the armored position)

**REFERENCES** (DO NOT INCLUDE RELATIVES)

NAME	ADDRESS/TELEPHONE NUMBER	BUSINESS	YEARS ACQUAINTED

**APPLICANT'S STATEMENT**

I understand that Granite City Armored Car, Inc. follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the President of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

**I understand that any job offer made by Granite City Armored Car, Inc. will be contingent upon a Drug and Alcohol Screening test, a MVR check and a criminal background check with the BCA/FBI. Should an offer be made, Granite City Armored Car, Inc. will provide the appropriate notices and forms.**

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**GRANITE CITY ARMORED CAR  
Drug and Alcohol Testing Policy Receipt Form**

Print Name: \_\_\_\_\_

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

AKNOWLEDGEMENT OF RECEIPT OF ASSOCIATE  
DRUG AND ALCOHOL ABUSE POLICY

I have received a copy of, and understand that it is my responsibility to read and comply with the Granite City Armored Car's ("the company") Employee Drug and Alcohol Testing Policy.

By signing below, I have indicated my understanding of this policy and its implications to my employment status.

Signature:

\_\_\_\_\_