

Will you need interviewing or testing accommodations for a mental or physical disability as defined in the Rehabilitation Act of 1973 and Americans with Disabilities Act of 1990?: YES or NO

Are you able to perform the essential functions of the position for which you are applying, either with or without reasonable accommodations?: YES or NO

Have you ever pleaded guilty, no contest to or been convicted of a felony?: YES or NO

If yes, please provide the nature of the offense, date, location and disposition: _____

A conviction record will not necessarily bar you from employment. This information will only be used for job-related purposes and only to the extent permitted by applicable law.

Personal Information

Legal Name: _____
Last First Middle

Social Security Number: _____ Alias, Nicknames, Maiden Name: _____

Address: _____
Number, Street, Apt number City State Zip code

Home Phone Number (Area Code): _____ Cell Number (Area Code): _____

Mailing Address (if different from current address): _____

Email Address: _____

List all previous residences in the past 5 years

(If you need more space, please attach a separate sheet)

From: _____ To: _____ Address: _____
Mo/Yr Mo/Yr Number, Street, Apt number City State Zip code

From: _____ To: _____ Address: _____
Mo/Yr Mo/Yr Number, Street, Apt number City State Zip code

From: _____ To: _____ Address: _____
Mo/Yr Mo/Yr Number, Street, Apt number City State Zip code

From: _____ To: _____ Address: _____
Mo/Yr Mo/Yr Number, Street, Apt number City State Zip code

From: _____ To: _____ Address: _____
Mo/Yr Mo/Yr Number, Street, Apt number City State Zip code

Education

Did you graduate from high school?: YES or NO If "no", do you have a GED?: YES or NO

If you did not graduate from high school, indicate the highest grade you completed: _____

Please list all schools attended starting with high school. Under "Type" please indicate Diploma, Degree, License or Certification.

School name and location: _____ Did you graduate?: _____

Course of Study: _____ Type: _____

School name and location: _____ Did you graduate?: _____

Course of Study: _____ Type: _____

School name and location: _____ Did you graduate?: _____

Course of Study: _____ Type: _____

School name and location: _____ Did you graduate?: _____

Course of Study: _____ Type: _____

Military and Security Experience

Veteran of U.S. Armed Forces?: YES or NO If "yes", what Branch of Service: _____

Primary Military Occupational Specialty: _____

Secondary Military Occupational Specialty: _____

Date entered: _____ Type of Discharge: _____
Mo/Da/Yr

Do you have a DD214?: YES or NO List your Military Reserve Status: __ Active __ Inactive __ None

Security Experience?: YES or NO If "yes", Number of Years of Experience: _____

If "yes", what Type of Experience: _____
(For example, Military Police, Security Police, OSI, CID)

Do you have a security clearance?: YES or NO If "yes", type of clearance: _____

For security positions only; last physical: _____ last training: _____
Mo/Da/Yr Mo/Da/Yr

Investigative Experience?: YES or NO If "yes", Number of Years of Experience: _____

If "yes", what Type of Experience: _____

Professional Employment History

Provide your employment history for the previous five employers or last ten years, whichever is applicable. Begin with your most recent employer. If you had any intervening periods of military service, unemployment or schooling, please list these periods in sequence.

Current/Most Recent:

Company Name: _____

Company Address: _____

Employment dates: From: _____ To: _____ Position held: _____
Mo/Yr Mo/Yr

Description of duties: _____

Last Annual Base salary: _____ Reason for leaving: _____

Supervisor: _____ Telephone number: _____
Name/Title

Company Name: _____

Company Address: _____

Employment dates: From: _____ To: _____ Position held: _____
Mo/Yr Mo/Yr

Description of duties: _____

Last Annual Base salary: _____ Reason for leaving: _____

Supervisor: _____ Telephone number: _____

Company Name: _____

Company Address: _____

Employment dates: From: _____ To: _____ Position held: _____
Mo/Yr Mo/Yr

Description of duties: _____

Last Annual Base salary: _____ Reason for leaving: _____

Supervisor: _____ Telephone number: _____

Company Name: _____

Company Address: _____

Employment dates: From: _____ To: _____ Position held: _____
Mo/Yr Mo/Yr

Description of duties: _____

Last Annual Base salary: _____ Reason for leaving: _____

Supervisor: _____ Telephone number: _____

Company Name: _____

Company Address: _____

Employment dates: From: _____ To: _____ Position held: _____
Mo/Yr Mo/Yr

Description of duties: _____

Last Annual Base salary: _____ Reason for leaving: _____

Supervisor: _____ Telephone number: _____

Professional References

List professional references (i.e., managers, colleagues, subordinates). Please do not list relatives and personal friends

Name: _____ Title: _____

Phone Number: _____ Years known: _____

Name: _____ Title: _____

Phone Number: _____ Years known: _____

Name: _____ Title: _____

Phone Number: _____ Years known: _____

List special skills that may qualify you as being able to perform job-related functions for the position. If applicable, please indicate computer software proficiency and typing proficiency:

List honors, publications and /or memberships in professional, trade, business or civic associations related to your professional/occupational field. (Exclude references that would reveal gender, race, religion, national origin, age, disability or any other protected status):

Applicant Certification

I certify that the information I have provided on this application and on any attached resume is true, complete, and correct to the best of my knowledge. If my statements are found to be untrue, incomplete, or otherwise not in good faith, I understand that consideration for employment may be denied, or if hired, my employment may be terminated.

Initials: _____

I understand that employment is contingent upon satisfactory completion of pre-employment screening, which may include health examination(s), background check(s), and other requirements. I hereby authorize employers, school, and persons named as references to provide information that may be required to arrive at an employment decision. I release North American Security, Inc. and parties providing the information from any and all liability for any damage resulting from the release of such information.

Initials: _____

I understand and agree that this application for employment does not obligate North American Security, Inc. to employ me and if hired I will be free to resign at any time. I understand that North American Security, Inc. may terminate my employment and compensation at any time, with or without cause, and with or without notice. Moreover, I understand the at-will nature of my employment relationship with North American Security, Inc. can only be altered by a written agreement signed by North American Security, Inc. officials and me, which clearly and expressly specifies the intent to do so. I understand and agree this application shall constitute a final and fully binding integrated agreement with respect to the at-will nature of my employment relationship and that there are no oral or collateral agreements regarding this issue.

Initials: _____

Applicant Signature: _____

Date: _____

Applicant Name: _____

(Please Print)

Release of Information Acknowledgement

RELEASE OF INFORMATION TO EMPLOYER AND CLIENTS:

I understand that in connection with the application process, North American Security, Inc. may request information from my past employers, educational institutions, personal references, and any public or private agencies that have issued me either a professional or vocational certification or license. I also understand that such investigation may include a review of my criminal records. I have provided complete and truthful information to North American Security, Inc. regarding all sources of information about my past employment, education, licenses, certification, criminal conviction record, previous degree of security clearance, as well as any other information requested in the employment application and have been fully informed that any misrepresentation or material omissions concerning such information will be grounds for denying my application, withdrawing any offers of employment or immediate discharge. In order to assist North American Security, Inc. in obtaining documents and information to confirm my background, if necessary, I hereby consent to the release of information specifically described below.

DISCLOSURE:

Under the applicable provisions of the federal Fair Credit Reporting Act (FCRA) and Driver Privacy Protection Act (DPPA) notice is hereby given that a consumer report may be requested. The report may include the following types of information, educational accomplishments, employment history, workers compensation claims, criminal records and civil records. In addition, an investigative consumer report may be requested. Such report contains information regarding character, general reputation, personal characteristics; mode of living, which obtains from personal interviews with neighbors, friends and associates. These reports will be used for employment purposes only.

REQUEST, AUTHORIZATION AND CONSENT TO RELEASE OF EMPLOYMENT INFORMATION:

I request, authorize and consent the release of information to North American Security, Inc. regarding my previous employment and authorize all past employers and agents that they may designate, to respond to verbal or written inquiries from North American Security, Inc. regarding my employment record, including, but not limited to, positions held, dates of employment, last pay rate, work performance, disciplinary records, reliability, and any incidents of dishonesty, insubordination, violence, and or unsafe, harmful or threatening behavior, including information based upon materials in my personal file.

REQUEST, AUTHORIZATION AND CONSENT TO RELEASE OF PERSONAL REFERENCES INFORMATION:

I specifically request, authorize and consent to North American Security, Inc. verbal or written inquiries addressed to my personal references about the information contained in my application, as well as my reliability, honesty and potential tendency, if any, to engage in any form of violence or other harmful, unsafe or threatening behavior.

REQUEST, AUTHORIZATION AND CONSENT TO RELEASE OF LICENSING OR CERTIFICATION INFORMATION

I request, authorize and consent to the release of information from any public agency or private entity concerning any professional, vocational, or driving license or certification that have held in the past or currently hold, including, but not limited to information concerning whether such a license or certification is in good standing and any disciplinary or other proceedings concerning such a license or certification.

REQUEST AUTHORIZATION AND CONSENT TO INVESTIGATIONS OF CRIMINAL RECORDS

I request, authorize and consent to North American Security, Inc. through investigations of whether I have record of criminal conviction and if so, the nature of such criminal convictions and all the surrounding circumstances available through lawful means. North American Security, Inc. has advised me that its criminal background will focus on convictions and that a criminal record will not necessarily disqualify me from employment.

Acknowledgement of civil code 1786.50 I am fully aware that under the civil code 1786.50 that that the employer requesting a background check and is required to prove me with a copy of the report within 7 days of our initial meeting. I agree to return to the employer's place of application and physically obtain a copy of my background check and sign an acknowledgment that I have done so. Failure to do so may impede my ability to be considered for employment. I agree the employer has notified me that it intends to comply with civil code 1786.50 in this way.

RELEASE OF CLAIMS

I further hereby release and hold harmless North American Security, Inc., its officers, employees and agents, and any other person or public or private entities, inquiring about investigating, furnishing, communicating, reviewing or evaluating information or documents pursuant to the Request Authorization. Consent and Release, or making any written or verbal communications for such purposes, from any and all claims arising from such activities including but not limited to, any claims whatsoever for defamation, violation of California Labor Code section 1050, (governing unsolicited or false references) fraud, misrepresentation, intentional or negligent interference with prospective business relations or contact, breach of contract (including any settlement agreement) negligent or intentional infliction of emotional distress, employment discrimination, or violation of public policy, and any other potential claims, demands, damages, liabilities and or action of any kind whatsoever, whether known or unknown to me presently, that I may have now or in the future. I voluntarily grant this release for purpose of supporting my application for employment and based upon my desire to encourage North American Security, Inc. consideration of my application.

I have carefully read this request, Authorization, Consent and Release and have voluntarily agreed to its terms to assist North American Security, Inc. in the evaluation of my qualifications for employment and in meeting the business necessity of hiring honest, trustworthy, reliable and non-violent employees who do not pose a risk of serious harm in the workplace. I additionally agree to fully cooperate with North American Security, Inc. in permitting the release of all the above information and reports. I additionally understand that all information and documents generated, received or maintained by North American Security, Inc. during, or as a result of its investigation, will be maintained as confidential information and that North American Security, Inc. will not release such information or documents to me.

I am furnishing my social security number, voluntarily with the understanding that such is not required by federal statute or regulation in order to facilitate the location of records that may be reviewed in connection with my employment application

Applicant Signature: _____

Date: _____

Applicant Name: _____

(Please Print)

APPLICANT SELF-IDENTIFICATION FORM

To assist North American Security, Inc. in gathering statistical information required for maintaining compliance with Equal Employment Opportunity and Affirmative Action regulations, we ask that you complete this portion of the of application. The information you supply is **voluntary** and your failure to supply this information will in no way impact a decision regarding your employment. This information will be kept confidential and will be used only in accordance with the provisions of the applicable laws and regulations. This form will be detached from your application and filed separately.

Gender: **Male** **Female**

RACE OR ETHNIC GROUP

Hispanic or Latino- A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

White (not Hispanic or Latino)- A person having origins in any of the original peoples of Europe, Middle East or North Africa.

Black or African American (not Hispanic or Latino)- A person having origins in any of the black racial groups of Africa.

Native Hawaiian or other Pacific Islander (not Hispanic or Latino)- A person having origins in any of the peoples of Hawaii, Guam, Samoa or Pacific Islands.

Asian (not Hispanic or Latino)- A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Island, Thailand and Vietnam.

American Indian or Alaska Native (not Hispanic or Latino)- A person having origins in any of the original peoples of North and South American (including Central America), and who maintain tribal affiliation or community attachment.

Two or more races (Not Hispanic or Latino)- All persons who identify with more than one of the above races.

I do not wish to self-identify

VETERAN STATUS INFORMATION

Veteran of the Vietnam era- a veteran who: (1) served in the U.S. military, ground, naval or air service on active duty for a period of more than 180 days, and was discharged or released with other than a dishonorable discharge. If any part of such active duty occurred: (a) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (b) between August 5, 1964 and May 7, 1975, in all cases, or (2) was discharged or released from active duty due to a service-connected disability if any party of such active duty occurred as listed above in (a) and (B).

Special Disabled Veteran – a veteran who served on active duty in the U.S. military, ground, naval, or air service and (1) who was discharged or released from active duty because of a service-connected disability, or (2) who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) for certain disabilities under laws administered by the Dept. of Veterans’ Affairs (i.e., disabilities rated at 30% or more, or at 10 or 20% if the veteran has been determined to have a serious employment handicap).

Recently Separated Veteran – means any veteran who served on active duty in the U.S. military, ground, naval, or air service during one year period beginning on the date of such veteran’s discharged or release from active duty.

Other Eligible Veteran – any other veteran who served on active duty in the U.S. military, ground, naval, air service during a war or in a campaign or expedition for which a campaign badge has been authorized, other than a disabled veteran, veteran, veteran of the Vietnam era, or recently separated veteran.

I am not a Veteran.

Individuals with Disabilities – a person who (1) has a physical or mental impairment which substantially limits one or more of such person’s major life activities; (2) has a record of such impairment, or (3) is regarded as having such an impairment.

Applicant Signature

Date

Printed Name of Applicant

Equal Opportunity Employment Policy

It is the policy of the Company to be fair and impartial in all North American Security relations with employees and to recognize the dignity of the individual. Every employee is to be given fair and impartial treatment and allowed to advance in the organization as his abilities warrant and as openings occur. North American Security prefers to promote from within to fill openings, if qualified employees are available. Past performance, ability, merit, and capacity are all given consideration when reviewing employees for promotion.

DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA

In order to provide emphasis on the employment of qualified disabled veterans and Veterans of the Vietnam Era, any employment opening existing within North American Security is be listed with the local disabled veterans outreach program which provides additional access and job search capabilities. Additional postings of available jobs may occur on other appropriate and compliant sites.

EMPLOYMENT OF THE DISABLED

North American Security will not discriminate against any employee or applicant for employment because of physical or mental disability in regard to any position for which the employee or applicant is qualified or "fit for duty". This includes recruiting, employment, promotion, demotion, transfer, and selection for training, compensation in any form, layoff, or termination. North American Security endeavors to provide reasonable accommodations to disabled applicants or employees, if such accommodations can be provided without undue hardship to North American Security's business.

EQUAL EMPLOYMENT OPPORTUNITY

It is North American Security's responsibility to ensure that you and all potential employees are evaluated on the basis of qualifications and ability, without regard to age, gender, race, color, religion (including the practice of religion), marital status, sexual orientation, national origin, disability, veteran status, or any characteristic protected by law. North American Security endeavors to provide religious accommodations to its employees (accommodating religious observances or practices, if they can be provided without undue hardship to North American Security's business), including, but not limited to, deviations from uniform and grooming standards upon written request to North American Security's corporate Human Resources Department. While these activities are generally considered the responsibility of management, each employee is obligated to take an active role in putting these principles into practice in his or her daily work environment.

It is North American Security's firm conviction that equal opportunity will contribute to the success of both the Company and its employees. North American Security adheres to a plan of Affirmative Action that provides equal employment opportunities to all present and potential employees of North American Security.

I understand I will be required to read, understand and abide by this policy.

Signature

Printed Name

Work Location

Date

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2017
Page 1 of 2

Why are you being asked to complete this form?

Because we do business with the government, we must reach out to, hire, and provide equal opportunity to qualified people with disabilities.¹ To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

- Blindness
- Autism
- Bipolar disorder
- Post-traumatic stress disorder (PTSD)
- Deafness
- Cerebral palsy
- Major depression
- Obsessive compulsive disorder
- Cancer
- HIV/AIDS
- Multiple sclerosis (MS)
- Impairments requiring the use of a wheelchair
- Diabetes
- Schizophrenia
- Missing limbs or partially missing limbs
- Intellectual disability (previously called mental retardation)
- Epilepsy
- Muscular dystrophy

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

Your Name

Today's Date

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2017
Page 2 of 2

Reasonable Accommodation Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

¹ Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

PUBLIC BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.