

National Public Safety

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Toll Free (877) 906.SAFE

Telephone 619.401.9431

Facsimile 619.401.2681

Dear Applicant,

Thank you for taking the time to apply for our company. We are a corporation that prides itself on *professionalism, pride and integrity*.

We are currently accepting applications for all areas of Public Safety such as Patrol Officers, Community Service Officers and Dispatchers. After completing the initial application and skills test, please return both forms to the receptionist and have your certifications, permits, licenses and identification card ready for him/her to make a copy. He/She will set up an appointment for an interview with a supervisor. Due to our professional environment, please come dressed appropriately for the interview. Once again, thank you for your interest in our company.

-National Public Safety

It is the ongoing policy of our company to afford equal employment opportunity to qualified individuals regardless of their race, color, religion, sex, national origin, age, physical or mental handicap, veteran status, or because they are disabled veterans, and to conform to applicable laws and regulations. In keeping with the intent of this policy, the company will adhere strictly to the following personnel practices:

Recruitment, hiring, and promotion of individuals in all job classifications will be conducted without regard to race, color, religion, national origin, age, sex, physical or mental handicap, veteran status, or because he or she is disabled veteran, except where a bona fide occupational qualification must be met.

Employment decisions will be made in such a manner as to further the principles of equal employment opportunity through the use of valid job-related criteria. All other personnel actions, such as compensation, benefits, transfers, training and development, educational assistance, and social and recreational programs, will be administered without regard to race, color, religion, national origin, age, sex, physical or mental handicap, veteran status, or because he/she is a disabled veteran, except where a bona fide occupational qualification must be met.

Thorough and documented analyses of all personnel actions will be conducted to ensure compliance with the concept of equal opportunity.

BACKGROUND INVESTIGATION QUESTIONNAIRE: *Answering yes to these questions does NOT constitute an automatic rejection to employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be of consideration.*

Full Name: _____
Last First Middle

Have you ever been convicted of a crime? ☐ Yes ☐ No
If yes, give dates and details: _____

Have you ever been cited for any traffic violation? ☐ Yes ☐ No
If yes, please explain when, where, why, and disposition _____

Have you ever experimented with narcotic substance? ☐ Yes ☐ No
If yes, please explain what type, amount, and when last used _____

Have you ever been terminated or asked to resign from employment as a result of a drug or alcohol abuse?
..... ☐ Yes ☐ No
If yes, please explain the full situation including dates and type of drug used _____

I certify that my answers are true and complete to the best of my knowledge. I authorize National Public Safety to make such investigations and inquiries of my personal, employment, educational, criminal, driving and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or persons from all liability to inquiries in connection to my application. In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ **Date:** _____

Employment Application

Programs, services and employment are available equally to everyone.
Please inform the Human Resources Department if you require reasonable
accommodation to the application or interview.

Date: _____

Position Applied for: _____

APPLICANT DATA: Please PRINT in black/blue ink.

How were you referred to us: ☐ Internet ☐ Newspaper ☐ Friend ☐ Walk-In ☐ Referral ☐ Recruited ☐ _____

Full Name: _____
Last First Middle

Address: _____ City: _____ State: _____ Zip: _____

Phone: () _____ Mobile/ Other: _____ Email: _____

Date available to start: _____ Social Security #: _____

Driver's license number: _____ State: _____

If you are under 18 and we require a work permit, can you furnish one? ☐ Yes ☐ No

If no, please explain: _____

Have you ever worked for this company? ☐ Yes ☐ No

Are you eligible for employment in this country? ☐ Yes ☐ No

Type of employment desired: ☐ Part Time ☐ Full-time

Have you ever been convicted of a crime? ☐ Yes ☐ No

If yes, give dates and details: _____

Answering yes to these questions does NOT constitute an automatic rejection to employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be consideration.

EDUCATION:

| | Name | # of years completed | Did you graduate? | Degree | Major |
|---------------------|------|----------------------|--|--------|-------|
| High School | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| College/ University | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| College/ University | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Other: | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

REFERENCES: Please furnish reference information of two (3) people to whom you are NOT related and by whom you have NOT been employed.

| Name | Phone # | Relationship | Length known? | Address |
|------|---------|--------------|---------------|---------|
| | () | | | |
| | () | | | |
| | () | | | |

SKILLS OR QUALIFICATIONS: Please summarize any training, licenses, permits and/or certificates that may qualify you as being able to perform job related functions for the position for which you are applying.

MILITARY SERVICE:

| | | | | | |
|-----------------------------------|--|-------------------|--|----|--|
| Branch | | From | | To | |
| Rank at Discharge | | Type of Discharge | | | |
| If other than honorable, explain: | | | | | |

EMPLOYMENT HISTORY: Begin with the most recent employer. Be sure to include any volunteer work. Do **NOT** write "please see resume"

| | | | | | |
|---|------------------------------|-----------------------------|--------|-------|--|
| EMPLOYER | | | | | |
| Employed from: | | Address: | | | |
| Employed to: | | Supervisor: | | Title | |
| Position held: | | Starting salary & Title: | | | |
| Reason for leaving: | | Ending salary & Title: | | | |
| Responsibilities: | | | | | |
| May we contact this employer for reference? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Phone: | | |
| EMPLOYER | | | | | |
| Employed from: | | Address: | | | |
| Employed to: | | Supervisor: | | Title | |
| Position held: | | Starting salary & Title: | | | |
| Reason for leaving: | | Ending salary & Title: | | | |
| Responsibilities: | | | | | |
| May we contact this employer for reference? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Phone: | | |
| EMPLOYER | | | | | |
| Employed from: | | Address: | | | |
| Employed to: | | Supervisor: | | Title | |
| Position held: | | Starting salary & Title: | | | |
| Reason for leaving: | | Ending salary & Title: | | | |
| Responsibilities: | | | | | |
| May we contact this employer for reference? | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Phone: | | |