# **APPLICATION FOR EMPLOYMENT**

All Inclusive Security and Investigation, LLC. 19472 Livernois Ave (Upper) Detroit, Michigan 48221 (313) 221-6157 Fax No: (313) 736-3862

www.allinclusivesecurity.com

**INSTRUCTIONS:** Each question should be fully arid accurately answered, please print or type except for the signature on the application. A separate application must be submitted for each position for which you are applying.

Position Applying for:	_ Date:
Applicant Information (Please provide your name as it appears on Social Security card	i)
Last:	_
First:	_ Middle initial:
MAILING ADDRESS	
Street Address:	
City: State: Zip:_	
PHONE NUMBERS	
Home:( ) Work: ( )	
SOCIAL SECURITY NO:	
Are you 18 years old or older?   Yes   No Age:	_
Are you a citizen of the United Stated or are you legally authori $\hfill \square$ Yes $\hfill \square$ No	zed to work in the U.S.?
Do you have any military experience related to the job you are $\hfill \square$ Yes $\hfill \square$ No	applying for?
If yes, please, explain	
Have you ever been convicted of a crime? □ Yes □ No	
If yes, please state the crime you were convicted of, the date, I surrounding the conviction. (Use an attachment sheet, if necess	
Are any of your friends or relatives employed by All Inclusive Se $\scriptstyle\square$ Yes $\scriptstyle\square$ No	ecurity and Investigation?
If yes, specify:	
Name of Relative/Friends:	
Relation of Relative:	

## **EMPLOYMENT HISTORY:**

Your work experience is an important factor in evaluating your qualifications. Please make certain that you provide complete and accurate information on previous job duties and levels responsibility. Account for all periods of time including related military and volunteer experi-ence, as well as any periods of unemployment.

Present (or most recent) Employ	/er:		
Type of Business,			
Telephone No: ( )			
Street Address:			
City:	State:	Zip:	
Name of Supervisor:			
May we contact this employer? Employment dates: From: To:	□ Yes □ No		
Job title and duties performed:			
Reason(s) for leaving or seeking	other employment:		
Previous Employer:			
Type of Business: Telephone No: ( )			
Street Address:			
City:	State:	Zip:	
Name of Supervisor:			
May we contact this employer? Employment dates: From: To:	□ Yes □ No		
Job title and duties performed:			
Reason(s) for leaving:			

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Name of High School:		
Street Address:		
City:	State:	Zip:
Diploma or GED		
Name of College/University:		
Street Address:		
City:	State:	Zip:
Was a Degree or Certificate Awarded	d: □ Yes □ No	
If Yes, Answer the following:		
Program/Major:		
Name of Technical /Trade School:		
Street Address:		
City:	State:	Zip:
Was a Certificate or License Awarded	d: 🗆 Yes 🗆 No	
If yes, please answer the following:		
Type of Certificate License:		
Special Skills: Typing:	M	
If yes, technical/systems/networking	g/programming/software:	
Telecommunication: □ Yes □ No		
If yes, list the type of equipment you	u have used:	
Additional Information that might qu	ualify you for this position:	

## **EQUAL OPPORTUNITY POLICY**

All Inclusive Security and Investigation LLC are committed to the concept of equal employment as an essential element in its basic personnel and administrative policy. This commitment shall be supported by positive, practical efforts to work continually toward improving recruitment, selection, employment, development and promotional opportunities for all employees as the employer, All Inclusive Security and Investigation LLC, affirms: its determination to oppose discriminatory practices prohibited by law in all areas.

#### **CERTIFICATION & RELEASE**

I certify that all statements made in this application are true and complete. I authorize All Inclusive Security and Investigation LLC to investigate all statements made as a part of this application and to secure any necessary information from all prior employers, references, academic institutions, law enforcement agencies, other persons and entities, and public records. I hereby release all such, persons, entities, employers, references, institutions, agencies and All Inclusive Security and Investigation LLC from any and all liability arising from their giving or receiving information about my employment history, academic credentials, qualifications, reputation, driving record and criminal record. A photocopy of this release can be used for all purposes. I understand that any false answers or misleading statements as well as misrepresentations by omission made by me as part of my application, will be sufficient for rejection of my application or for my immediate discharge should one be discovered after I am employed

Signature:_			
_			
Date:			

# **TO ALL APPLICANTS:**

**Ethnical Information:** 

The information requested is needed to comply with state and federal laws and regulations. The information will be used for statistical purposes only and will not be used as party of the hiring process. Submission of this information is strictly voluntary and refusal to provide it will not subject you to any adverse treatment.

□ American Indian or Alaskan Native
□ Asian or Pacific Asian
□ Black/African American
□ Hispanic/Latino
□ White/Caucasian
Sex: □ Male □ Female
Handicap/Disability: Can you perform the essential duties of the job in which you wish to be employed, with or without accommodation? $\square$ Yes $\square$ No
If yes, what accommodations?
How did you first learn of this job opportunity?
□ Walk-in
□ Job Posting
□ Friend
□ Employment Agency
□ Newspaper: which one?
□ Other: