



MERCHANTS SECURITY SERVICES

dba Merchants Security
Guard & Patrol Service
4766 Glendale-Milford Rd.
Blue Ash, Ohio 45242
513-891-0411

Protection
1885
since

DATE: _____

NAME: _____ PHONE: _____

CELL: _____

ADDRESS: _____

CITY: _____ STATE: _____

ZIP CODE: _____ COUNTY: _____

ARE YOU AT LEAST 18 YEARS OF AGE? YES _____ NO _____

HAVE YOU BEEN CONVICTED OF A FELONY IN THE PAST 20 YEARS?
YES _____ NO _____

IF YES DESCRIBE THE CHARGE: _____

LIST YOUR LAST 3 PLACES OF EMPLOYMENT INCLUDING PHONE NUMBERS AND
DATES OF EMPLOYMENT:

1. _____ PHONE: _____

2. _____ PHONE: _____

3. _____ PHONE: _____

LIST 3 PERSONAL REFERENCES:

1. _____ PHONE: _____

2. _____ PHONE: _____

3. _____ PHONE: _____

NAME, ADDRESS, AND PHONE NUMBER OF NEAREST RELATIVE

NOT LIVING WITH YOU:

_____ PHONE: _____

ARE YOU APPLYING FOR FULL TIME? YES _____ NO _____

ARE YOU AVAILABLE FOR WEEKENDS? YES _____ NO _____

ARE YOU AVAILABLE FOR NIGHTS? YES _____ NO _____

WHAT HOURS ARE YOU AVAILABLE TO WORK?

MON	TUES	WED	THUR	FRI	SAT	SUN

Do you have an automobile? YES _____ NO _____

Make of Car _____ Model _____ Year _____

Education:

Last Grade Completed _____ Diploma or Degree: _____

Date Attended _____ Subject Studied: _____

Do you have 120 hours of police training? YES _____ NO _____

Military:

Are you currently or have you ever been a member of the armed forces? YES _____ NO _____

Date of Service	Branch	MOS
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If requested can you provide a DD-214 discharge form? YES _____ NO _____

I certify that the above information is correct and complete to the best of my knowledge. I understand that any misrepresentation, falsification, or omission of the above reported information will be just cause for rejection of my application or for immediate termination after my employment. I also understand and agree that statements made in this application may be subject to verification from each of my former employers and any other persons who may have information concerning me. Therefore, I hereby release and hold harmless Merchants Security Services, Inc. dba Merchants Security Guard & Patrol Service and any other person(s) by obtaining or furnishing such information.

I also understand & agree that if a holiday falls on my normally scheduled work day that I will be required to perform that shift(s) on said holiday.

I further agree to wear my complete issued uniform provided by Merchants Security Guard & Patrol Service at all times while on duty at any assigned post and to adhere closely to any and all post regulations required by Merchants Security Guard & Patrol Service and its customers. At no time however, am I permitted to wear any part of my issued uniform while NOT on duty for Merchants Security Guard & Patrol Service. I realize that the uniform in its entirety is property of Merchants Security Guard & Patrol Service and must be surrendered upon request or I will face legal recourse to recover same.

I understand that a charge of \$12.00 will be deducted from my earnings within 30 days of my employment for registration fees paid to the State of Ohio, Department of Public Safety as required by Ohio law. I further understand that the ID card issued by the Ohio Department of Public Safety is property of the State of Ohio and must be returned to Merchants Security Guard & Patrol Service upon my leaving employment.

I further agree that if I leave my employment with Merchants Security Guard & Patrol Service for any reason I will not call on any of its accounts or customers for sales purposes pertaining to security of any kind for a period of at least two (2) years from the last day of my employment with Merchants Security Guard & Patrol Service.

Signature: _____ Date: _____