



660 S. Figueroa Street  
Suite 1880  
Los Angeles, CA 90017  
213.688.3019  
f: 213.688.3029  
www.kadimasecurity.com  
PPO: 15993

## Security Officer Requirements

Dear Applicant,

Thank you for taking the time to apply for a position with Kadima Security Services, Inc. as a Security Officer.

It is very important that your application be filled out completely and accurately as the information provided gives us the opportunity to determine where your unique talents may be used within our company.

Requirements of the Position for which you are applying:

- **A valid California Security Guard Card**
- **A valid California Drivers License**
- **A vehicle in good working condition to use to travel to scheduled assignments**
- **The ability to speak and write in English**
- **A working cell phone**
- **The ability to arrive at scheduled assignments on time**
- **The ability to stand and/or sit for long periods of time.**
- **Must be in physically good health.**

**Acknowledgement:** I have read and understand the requirements of the position for which I am applying.

\_\_\_\_\_  
**Print Name**

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

\_\_\_\_\_  
**Signature**

Good Luck!

Laurence M. Blocker, Sr.  
Director of Operations  
KADIMA SECURITY SERVICES, INC.



**APPLICATION FOR EMPLOYMENT**

**APPLICATION FOR EMPLOYMENT**

Position Applied For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

The Company is an equal opportunity employer. The Company does not discriminate on the basis of race, color, religion, sex, national origin, age, disability, or any other characteristic protected by applicable state or federal civil rights laws.

**PERSONAL INFORMATION**

<b>Full Name Listed on Birth Certificate/Driver's License/SS Card</b>			<b>Cell Phone:</b>
<b>Present Street Address</b>	<b>City</b>	<b>Zip</b>	<b>Home Phone:</b>
<b>Social Security Number (Required):</b>			
<b>Personal Email Address:</b>			
<b>Are you able to perform the essential functions of the position for which you are applying, either with or without reasonable accommodations?</b>			<b>Yes No</b>
<b>Do you have the legal right to work and be employed in the U.S.?</b> (Proof of identity and legal authority to work in the U.S. is a condition of employment.)			<b>Yes No</b>
<b>Are you at least age 18?</b> (Proof of age and work permits may be required prior to hiring)			<b>Yes No</b>
<b><u>Recruiting Resource:</u></b>			
<input type="checkbox"/> <b>Monster.com</b> <input type="checkbox"/> <b>Careerbuilder.com</b> <input type="checkbox"/> <b>Employment Agency:</b> _____			
<input type="checkbox"/> <b>Human Resources Contacted Me</b> <input type="checkbox"/> <b>Employee Referral:</b> _____			
<b>Other:</b> _____			
<b>Do you plan to work another job if you were to obtain employment with our company?</b>			<b>Yes No</b>
<b>Do you plan to attend school if you were to obtain employment with our company?</b>			<b>Yes No</b>
<b>Do you have a reliable means of transportation to and from work?</b>			<b>Yes No</b>

What interests you about our Company?

Extracurricular Activities (You may omit those which indicate your race, color, religion, sex, national origin, ancestry, age or the existence of a disability.)

**EDUCATION**

	Name of School and Address	Graduated (Yes/No)	Number of Years	Course or Major	Grade Point Average
Junior High					
High School					
College					
Other					

**GENERAL INFORMATION**

Date available to start:	Full-time or Part-time?
Days Available to Work: Sunday Monday Tuesday Wednesday Thursday Friday Saturday	
Hours Available to Work: _____	
_____	

Have you ever been convicted of a crime other than a traffic violation?\* Yes No

*(NOTE: CA Only - Please exclude misdemeanor convictions for marijuana-related offenses more than two years old; convictions that have been sealed, expunged, or legally eradicated; and misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed. A conviction is not an automatic bar to employment. Each case will be considered on its own merits.)*

If Yes, please explain and state the charge, the court, the date of the conviction, and the disposition of the case:



<u>Company No. 3</u>		Address & Telephone Number	
<u>Employed (Month and Year)</u>		<u>Rate of Pay</u>	
<u>From/Date</u>	<u>To/Date</u>	<u>\$Starting Rate\$</u>	<u>\$Ending Rate\$</u>
		<u>Average Number of Hours Worked Per Week:</u>	
Position(s) Held: Supervisor's Name and Position			
Describe all of your significant duties:			
May we contact this employer?			Yes No
Reason for leaving:			

Please identify and explain all periods of unemployment during the last five years:
From Date/To Date & Reason for Unemployment:

**PROFESSIONAL REFERENCES (Those you've worked with in the past):**

Full Name	Title	Phone Number	# of Years Know
1.			
2.			
3.			

**PERSONAL REFERENCES:**

Full Name	Title	Phone Number	# of Years Know
1.			
2.			

**I hereby certify** that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by the Company unless I have indicated to the contrary. I authorize the references listed above, as well as all other individuals whom the Company contacts, to provide the Company any and all information concerning my previous employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the Company as well as from any use or disclosure of such information by the Company or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment.

In consideration of my employment, I agree to conform to the rules and standards of the Company. I further agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or at the option of the Company. I understand that no employee or representative of the Company, other than its president, has the authority to enter into any agreement for employment for any specified period of time, or to make any express or implied agreement contrary to the foregoing. Further, the president of the Company may not alter the at-will nature of the employment relationship or enter into any employment agreement for a specified time unless the president and I both sign a written agreement that clearly and expressly specifies the intent to do so. I agree that this 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, written, or collateral agreements regarding this issue.

I also understand that all offers of employment are conditioned on the Company's receipt of satisfactory responses to reference requests, a criminal background check and the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Thank you for your interest in Kadima Security Services, Inc.**

**AN EQUAL OPPORTUNITY EMPLOYER**

**EEO APPLICANT FLOW DATA FORM**

Dear Applicant:

Federal and state rules require that we keep applicant flow data in our records for statistical purposes. Employers are asked to solicit this information from applicants on a purely voluntary basis. The information is not used for any employment decision.

If you wish to provide this information, please do the following:

1. Do not place your name on this sheet;
2. Enter the date (of the interview) below;
3. Enter the position applied for below;
4. Check the applicable boxes.
5. Hand the completed EEO Form to the HR representative, folded for confidentiality.
6. HR Representative will file the Form separate from your Employment Application.

---

**This form will not be kept with your employment application.**

Today's Date: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Check One:        \_\_\_\_\_ Male                \_\_\_\_\_ Female

Check One:        \_\_\_\_\_ Caucasian (not of Hispanic origin)

                      \_\_\_\_\_ Black (not of Hispanic origin)

                      \_\_\_\_\_ Hispanic

                      \_\_\_\_\_ Asian or Pacific Islander

                      \_\_\_\_\_ American Indian or Alaskan Native

                      \_\_\_\_\_ Other