

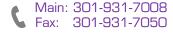
EMPLOYMENT APPLICATION



Applicant Information Please complete application in full and email to HR@StarlightSecurity.com with your resume. If your qualifications meet our requirements you will be contacted. Please no phone calls. Full Name: Date: Last Address: Street Address Apartment/Unit # City State ZIP Code Phone: Email Date Available: _____ Social Security No.:_____ Desired Salary:\$ Position Applied for: YES NO If no, are you authorized to work in the U.S.? Are you a citizen of the United States? Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, Starlight Security Inc. (SSI) will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization. YES NO Have you ever worked for this company? If yes, when? YES NO Have you ever been convicted of a felony? П If yes, explain: Education High School: _____Address: _____ To:____ Did you graduate? Diploma:: College: _____ Address: _____ To:___ Did you graduate? From: Degree: Other: NO ___ To:____ Did you graduate? From: Degree:____



	Refer	ences			
Please list th	hree professional references.				
Full Name:				Relationship:	
Company:				Phone:	
Address:					
Full Name:				Relationship:	
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Address:					
				Relationship:	
Company: Address:				Phone:	
Addicss.	Dustieus E				
	Previous E	mpioyme	ent		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary:	
Responsibilit	ies:				
From:	To:	Reason fo	or Leaving:		
May we cont	act your previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary:	
Responsibilit	ies:				
From:	To:	Reason fo	or Leaving:		
May we cont	act your previous supervisor for a reference?	YES	NO		





Company:				Phone:	
Address:	Supervisor:				
Job Title:	salary: <u>\$</u> End		Ending Salary:\$		
Responsibilities:					
	To:			:	
May we contact your previous	supervisor for a reference?	YES	NO		
	Profession	al Licens	es		
TYPE OF LICENSE	STATE GRANTING LICENSE			LICENSE NUMBER	
TYPE OF LICENSE	STATE GRANTING LICENSE			LICENSE NUMBER	
	Military	Service			
Branch:		From:		n: To:	
Rank at Discharge: Type		Type of	pe of Discharge:		
If other than honorable, explair					
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Starlight Security Inc. (SSI) is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, SSI complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. SSI also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

Application should be completed in full and email to HR@StarlightSecurity.com with your resume. If your qualifications meet our requirements you will be contacted.

Please no phone calls.









PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED:	DATE:		_
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For Maryland Applicants Only

POLYGRAPH NOTIFICATION AND ACKNOWLEDGMENT:

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. ANY EMPLOYER WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

Signature of Applicant:	Date:	
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Main: 301-931-7008 Fax: 301-931-7050

