



Zicherheit, LLC
P.O. Box 1822
Millersville, MD 21108
(410)212-8431

Employment Application

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

POSITION/AVAILABILITY:

Position Applied For

Days/Hours Available

Monday ____ Tuesday ____ Wednesday ____ Thursday ____

Friday ____ Saturday ____ Sunday ____

Hours Available: from _____ to _____ Date available to start work? _____

PERSONAL INFORMATION:

First Name _____

Middle Name _____

Last Name _____ Suffix _____

Street Address

City, State, Zip Code

Phone Number

(____) _____
Home

(____) _____
Cell

Initials: _____



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Are you a United States Citizen or a Permanent Resident? Yes _____ No _____

If not, are you eligible to work in the United States? Yes _____ No _____ N/A _____

(Documentation will need to be provided to meet US Government requirements)

Driver's License # _____ Date of Expiration _____

(A copy of your driving record is required, if hired, or Zicherheit will obtain one for a fee)

Social Security Number: _____ Date of Birth: _____

If you are under age 18, do you have an employment/age certificate? Yes ___ No ___

Can you read and write in the English language? Yes ___ No ___

EDUCATION:

Name and Address of School - Degree/Diploma - Graduation Date

High School _____ Year Graduated _____

City _____ State _____

College _____ Year Graduated _____

City _____ State _____

Major _____

Trade/Business School _____ Year Graduated _____

City _____ State _____

Course(s) _____

Initials: _____



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Training relevant to the position for which you are applying:

Skills and Qualifications: Licenses, Skills, Training, Awards

How did you learn about Zicherheit LLC:

Advertisement _____ (which _____)

Job Fair _____ (which _____)

Other _____ (_____)

Service Record

Branch _____

Dates of Service _____

Type of Discharge _____

Are you a veteran _____

❖ A copy of your DD-214 is required

Initials: _____



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EMPLOYMENT HISTORY:

Present or Last Position:

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Salary: _____ Reason for Leaving: _____

=====

Previous Position(s):

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Initials: _____



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Responsibilities: _____

Salary: _____ Reason for Leaving: _____

=====

Employer: _____

Address: _____

Supervisor: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities: _____

Salary: _____ Reason for Leaving: _____

=====

(List any additional employment history on separate pages)

May we contact your present employer? Yes _____ No _____

Have you ever been terminated from a job or resigned in lieu of termination?

Yes _____ No _____ (If yes, list circumstances on a separate page and attach to this application)

Initials: _____



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References:

Name/Title Address Phone

Can you successfully pass a drug test? Yes _____ No _____

Can you successfully pass a background investigation? Yes _____ No _____

Have you ever been arrested? Yes _____ No _____

(If yes, list on a separate page and attach to the application – list date of offense, charge(s), court location, outcome – having been arrested won't necessarily eliminate you from obtaining employment)

Do you have any physical restraints or abilities that would prevent you from completing the duties as described? Yes _____ No _____ If yes, list: _____

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature _____

Date _____

Initials: _____