

Seacoast Security is an Equal Opportunity Employer



SEACOAST SECURITY

P. O. Box A; 290 West St, W Rockport ME
www.seacoastsecurity.com
Phone: (207) 236-4876
(800) 654-8800
Fax: (207) 236-8517

Seacoast Security, Inc.
"Creating Safe Harbors"

APPLICATION FOR EMPLOYMENT

Seacoast Security Values:

At Seacoast, our word is our promise! We provide an individual service and value specific to the needs of each and every customer. We recognize the important role each of our employees play in our success. How do we measure that success? By demonstrating these values and providing only the best for our customers and employees.

If employed by Seacoast Security or one of its divisions, I will support the values of Seacoast Security.

All employment practices and procedures will be free from illegal discrimination. All decisions concerning hiring, firing, transfer, promotion, discipline, training, job opportunities, wage and salary levels, etc. shall be made without illegal discrimination on the basis of race, sex, age, national origin, religion, physical or mental disability, or sexual orientation.

To be considered for a position, all questions must be completed.

A resume may be submitted however; this application must also be completed.

Personal Information:

Name:

Last First MI.

Street Address:

City, State, Zip

Home Telephone:

Day Telephone:

E-mail address:

Your Salary Expectations:

Which job status/shift would you accept? (Check all that apply)

Full Time
 Part Time
 Temporary
 Per Diem
 Shift:
 Day
 Evening
 Night
 Weekend
 Hol.

Which Seacoast Security location do you prefer? (Please check all that apply)

Rockport
 Freeport
 Portsmouth, NH
 Montpelier, VT
 Caribou
 Bangor
 Waterville
 Greenville

Desired Position:

SKILLS

Please indicate any office skills and equipment in which you are proficient, including computers and software:

Professional Associations of which you are a member:

Special Skills applicable to the job for which you have applied:

Office equipment you operate:

List other job-related skills you have:

Do you type: Yes No

WPM:

Working knowledge of computer software?

Yes No

If yes, what programs?

MS Excel

Beginner

Intermediate

Advanced

MS PowerPoint

Beginner

Intermediate

Advanced

MS Access

Beginner

Intermediate

Advanced

Other:

Beginner

Intermediate

Advanced

Please answer all of the following questions:

How did you learn about this position?

If employee referral, enter their name:

Are you available to work rotating shifts/schedules if required? Yes No

Are you available to work overtime if required? Yes No

Will you travel if the job requires it? Yes No

Do you have a relative working in a division of Seacoast Security ? Yes No

If yes, give name and relationship:

Have you ever been employed by any division of Seacoast Security, Inc? Yes No

Are you eligible to be lawfully employed in this country? Yes No

(Proof of citizenship or immigration status will be required if employed by Seacoast Security, Inc.)

Do you understand, if under 16 years of age, you must have a work permit on file in the Seacoast Security Human Resources Office before starting work? Yes No

Do you understand that if employed with any of the Seacoast Security divisions, you will be required to authorize direct deposit of your paycheck to a bank account of your choice? Yes No

Has a state licensing authority ever revoked, suspended or placed conditions upon your professional license(s)? Yes No

WORK HISTORY

List all previous employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. Please indicate if you were employed under a different name.

Name of Company:
 Street Address:
 City, State, Zip
 Employers Phone:

Job Title:

Employed From: through

Job Duties and Responsibilities:

Reason for Leaving:

May we contact this employer for a reference? Yes No

Name of Company:
 Street Address:
 City, State, Zip
 Employers Phone:

Job Title:

Employed From: through

Job Duties and Responsibilities:

[Large empty rounded rectangular box for job duties and responsibilities]

Reason for Leaving:

[Empty rounded rectangular box for reason for leaving]

May we contact this employer for a reference?

Yes No

Name of Company:

[Empty rounded rectangular box for company name]

Street Address:

[Empty rounded rectangular box for street address]

City, State, Zip

[Empty rounded rectangular box for city, state, zip]

Employers Phone:

[Empty rounded rectangular box for employer phone]

Job Title:

[Empty rounded rectangular box for job title]

Employed From:

[Empty rounded rectangular box for employed from]

through

[Empty rounded rectangular box for employed through]

Job Duties and Responsibilities:

[Large empty rounded rectangular box for job duties and responsibilities]

Reason for Leaving:

[Empty rounded rectangular box for reason for leaving]

May we contact this employer for a reference?

Yes No

EDUCATION

High School:

[Empty rounded rectangular box for high school]

Address:

[Empty rounded rectangular box for high school address]

City, State, Zip

[Empty rounded rectangular box for high school city, state, zip]

Major:

[Empty rounded rectangular box for high school major]

How many years did you complete?

[Empty rounded rectangular box for high school years completed]

Did you Graduate?

Yes No

Degree Type:

[Empty rounded rectangular box for high school degree type]

College:

[Empty rounded rectangular box for college]

Address:

[Empty rounded rectangular box for college address]

City, State, Zip

[Empty rounded rectangular box for college city, state, zip]

Major:

[Empty rounded rectangular box for college major]

How many years did you complete?
Did you Graduate? Yes No
Degree Type:

Post Graduate:
Address:
City, State, Zip

Major:
How many years did you complete?
Did you Graduate? Yes No
Degree Type:

Other:
Address:
City, State, Zip

Major:
How many years did you complete?
Did you Graduate? Yes No
Degree Type:

List scholastic honors, specialized training, apprenticeship, and extra-curricular activities that may be helpful when considering your application.

REFERENCES

Please list 3 references who are not related to you and are not former supervisors (Required)

Name:
Address:
Home Phone:
Work Phone:

Name:
Address:
Home Phone:
Work Phone:

Name:
Address:
Home Phone:
Work Phone:

READ AND SIGN

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING

I hereby certify that the facts set forth in the above employment application are true to the best of my knowledge. I understand that if employed, falsified statements or material omissions on this application may result in immediate dismissal. I also understand that, if offered a position at Seacoast Security, Inc. or any of its divisions, my employment is conditional upon successful investigative consumer reports. If employment is offered, I agree to any post-offer, pre-employment medical screening and to the disclosure to Seacoast Security, Inc. and its divisions of information and reports from the medical examination. In the event that I am photographed during the course of my employment, Seacoast Security, Inc. and its divisions will have my permission to use any or all photos for various public relation purposes.

Candidate's/Applicant's Signature

Date: