# For final submission of this application, please add copies of your Driver’s License and Concealed Carry permit.

# Personal Data

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Last  | First | Middle  |
|  |  |  |
| Address | City/State | Zip Code |
|  |  |  |
| Home Phone | Cell Phone | Email |
|  |  |  |
| DL Number/State | Date of Birth | SSN |
|  | ****Yes**** | ****No**** |
| Are you a US citizen? |[ ] [ ]
| Are you legally eligible to work in the US? |[ ] [ ]
| Are you a veteran? |[ ] [ ]
|  | Branch: |  |
| Do you have any law enforcement experience? |[ ] [ ]
|  | Department: |  |
| Do you have a concealed weapons license? |[ ] [ ]
|  | State: |  | Expiration: |  |
| Do you have a valid driver’s license? |[ ] [ ]
|  | State: |  | Expiration: |  |
| Have you been convicted of a crime? |[ ] [ ]
| Details: |  |

# Employment Desired

Date Available to Start: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Shifts**

Monday, Tuesday, Wednesday, Rotating Sundays 12 AM – 12 PM

Monday, Tuesday, Wednesday, Rotating Sundays 12 PM – 12 AM

Thursday, Friday, Saturday, Rotating Sundays 12 AM – 12 PM

Thursday, Friday, Saturday, Rotating Sundays 12 PM – 12 AM

**Days Available to Work (*Please mark available days or nights):***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  Shift | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
| Day (12PM to 12AM) |  |  |  |  |  |  |  |
| Night(12AM to 12PM |  |  |  |  |  |  |  |

Note: Limiting the availability may impact offer of employment and information does not guarantee requested schedule.

|  |  |  |
| --- | --- | --- |
|  | ****Yes**** | ****No**** |
| Have you worked for PH3 in the past? |[ ] [ ]
| Details: |  |
| Are you working or expect to work another job? |[ ] [ ]
| Details: |  |
| Can you work overtime? |[ ] [ ]

# Military

|  |  |  |
| --- | --- | --- |
| Have you served in the military? |[ ]  Yes |[ ]  No |
|  |  |  |  |
| Branch | MOS | Final Rank | Years of Service |
|  |
| Comments |

# Education

|  |  |  |  |
| --- | --- | --- | --- |
| Institution and Location | Dates Attended | Graduated? | Courses Studied |
| Name:Location: | From:To: | Yes [ ] No [ ]  | Studied:Degree: |
| Name:Location: | From:To: | Yes [ ] No [ ]  | Studied:Degree: |
| Name:Location: | From:To: | Yes [ ] No [ ]  | Studied:Degree: |

|  |  |  |
| --- | --- | --- |
| Are you planning to pursue further studies? |[ ]  Yes |[ ]  No |
| Details: |  |

# Certifications and Licenses

|  |  |
| --- | --- |
| Certification | Details/Expiration |
| ILEA, military, or NRA pistol |  |
| CPR |  |
| Baton |  |
| Security clearance |  |
|  |  |

# Employment History

Begin with the most recent.

## Employer 1

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name of Employer | Nature of Business | Name of Last Supervisor |
|  |  |  |
| Company Address | City | Zip |
|  |  |  |
| Phone Number | Employed From | Employed To |
|  |  |  |
| Reason for Leaving | Starting Pay Rate | Ending Pay Rate |

## Employer 2

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name of Employer | Nature of Business | Name of Last Supervisor |
|  |  |  |
| Company Address | City | Zip |
|  |  |  |
| Phone Number | Employed From | Employed To |
|  |  |  |
| Reason for Leaving | Starting Pay Rate | Ending Pay Rate |

# Domicile History

List your last four home addresses.

|  |  |  |
| --- | --- | --- |
| Complete Address | From | To |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# Supplemental Information

|  |  |  |
| --- | --- | --- |
|  | ****Yes**** | ****No**** |
| Do you have any relatives currently working for PH3? |[ ] [ ]
| Do you have reliable transportation? |[ ] [ ]
| Have you ever been terminated from a job? |[ ] [ ]
|  | Details: |  |
| Will you show up to work every day on time? |[ ] [ ]
| Explain within the box why you are interested in working for PH3. List any special skills you possess. Describe the value you bring to an employer. |
|  |

# EMAIL this completed Employment Application (with copy of Driver’s License and Concealed Carry Permit) and RESUME to Info@PH3LLC.com. You will receive a confirmation of receipt within 24 hours of your submission.