

**Corporate Office:**  
3828 Wacker Drive  
Mira Loma, Ca. 91752  
Ph: (951) 685-1761  
Fax: (951) 685-1441



**San Diego Area:**  
9260 Isaac Street, Suite D  
Santee, Ca. 92071  
Ph: (858) 277-7877  
Fax: (858) 277-7999

## APPLICATION FOR EMPLOYMENT

Time & Alarm Systems, Inc. is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law. Time & Alarm Systems, Inc. will not tolerate any form of unlawful discrimination, including sexual harassment.

### INTRODUCTORY INFORMATION:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

DL/State/Expiration#: \_\_\_\_\_

(Note: By signing below, you agree to allow Time & Alarm Systems to obtain DMV records)

### APPLICANT QUESTIONS:

Position Applied For: \_\_\_\_\_ Date Available: \_\_\_\_\_

If hired, can you provide documents required to establish your eligibility to work in the U.S.?  Yes  No

Are you 18 years of age or older?  Yes  No

Have you ever been employed at Time & Alarm Systems before? If Yes, when?  Yes  No

Do you have any friends or relatives employed by Time & Alarm Systems? If Yes, who?  Yes  No

How were you referred to Time & Alarm Systems? \_\_\_\_\_

Are you able to perform all essential job functions for which you are applying for with or without reasonable accommodation?  Yes  No

If hired, are you able to travel, work overtime or weekends as needed?  Yes  No

If driving is required for this position, do you have reliable transportation, including a current Valid driver's license, registration and proof of insurance in your name, or as a named insured?  Yes  No

If required for the position applied for, do you currently hold a valid CA Fire/Life & Data/Voice Certification and able to provide current certification per California Code?  Yes  No

If employment is offered to you a DOJ background will be conducted. Do you consent to that?  Yes  No



If you answered yes to questions a-d above, please explain in detail on a separate piece of paper and include the date of final disposition of the case and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. If applying for employment in California, Do not provide information concerning: (1) any conviction for which the record has been judicially ordered sealed, expunged or statutorily eradicated, or; (2) any misdemeanor conviction for which probation has been completed or discharged and the case has been judicially dismissed, or; (3) any marijuana conviction which is more than two years old from the date of this application.

**EDUCATION:**

High School or last grade completed:

Name & Address of School: \_\_\_\_\_

Course of Study: \_\_\_\_\_ Number of years completed: \_\_\_\_\_

Degree/Diploma: \_\_\_\_\_

College or Technical School

Name & Address of School: \_\_\_\_\_

Course of Study: \_\_\_\_\_ Number of years completed: \_\_\_\_\_

Degree/Diploma: \_\_\_\_\_

Other School or Training

Name & Address of School: \_\_\_\_\_

Course of Study: \_\_\_\_\_ Number of years completed: \_\_\_\_\_

Degree/Diploma: \_\_\_\_\_

Additional Training or Certifications

Name & Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_ Training or Course Duration: \_\_\_\_\_

Diploma/Certification: \_\_\_\_\_

**MILITARY EXPERIENCE:**

Branch of Service: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank/Type of Service: \_\_\_\_\_

Special Training/Experience: \_\_\_\_\_

Discharge Status: \_\_\_\_\_



Please read each statement and initial each to acknowledge your understanding and acceptance of the statement.

\_\_\_\_\_ **Disclosure to Applicants Concerning Drug/Alcohol Testing**

If you are offered a position with Time & Alarm Systems, you will be required to submit to a drug/alcohol test as a condition of employment. Refusal to timely submit to this test, or your failure to pass this test will result in an immediate recall of any employment offer. Neither the collector of specimens nor the medical professional who reviews the test results will be an employee of Time & Alarm Systems. All test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

\_\_\_\_\_ **Complete and Accurate Information**

I hereby certify under penalty of perjury that I have not knowingly withheld any information that might adversely affect my chance for employment and that all answers given by me are true and correct to the best of my knowledge. I have personally completed this application and understand that any omission or misstatement of material fact on this application or any other document used to secure employment, shall be grounds for rejection or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ **Investigation Authorization**

I authorize investigation into all statements and references contained in this application. Investigation may include interviews with others, driving, criminal and other background checks, and may also include credit when applicable. As condition of employment, I authorize post-hire investigations including driving, criminal and other background checks, drug/alcohol screening and credit when applicable.

**RECORD OF EMPLOYMENT:**

List positions starting with most recent:

-----  
Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Start Date: \_\_\_\_\_ Date Left: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
-----

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Start Date: \_\_\_\_\_ Date Left: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
-----



Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Start Date: \_\_\_\_\_ Date Left: \_\_\_\_\_

Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**WORK-RELATED REFERENCES:** List below three persons not related to you who have knowledge of your work performance within the last 10 years.

Name	Occupation	Years Known	Contact Information (email and phone)
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

**STATEMENT (Please read this statement carefully before signing this application):**

I understand that employment with Time & Alarm Systems, Inc. (TAS) is at-will, meaning that I or TAS may terminate my employment at any time, or for any reason consistent with applicable state or federal law.

I authorize TAS to conduct a thorough background investigation of my work and personal history, obtain DMV records and verify all data given on this application and during interviews. I hereby release TAS, and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information. I understand and acknowledge that if I am applying for a position which requires any licensing or certifications such as, but not limited to, valid driver's license, current auto registration and proof of motor vehicle insurance as well as California Fire/Life and Data/Voice Technician Certification that all required licenses and certifications are required as a condition of employment with Time & Alarm Systems.

I understand that Time & Alarm Systems will require successful completion of a drug screen test and acceptable background check as a condition of employment and that negative drug screen results are required as a condition of employment.

**I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire. I understand that Time & Alarm Systems is under no obligation to hire me as a result of accepting this completed application.**

Signature of Applicant: \_\_\_\_\_ Date Signed: \_\_\_\_\_