



*A Lifeline To Your Defense™*

# PRUSIK USA LLC



**PROFESSIONAL SOLUTIONS™**

## APPLICATION PACKET

### CHECKLIST

- Application completed and signed in all required areas.
- Questionnaire completed; and notarized.
- Application Packet notarized by Public Notary in all required areas.
- Copy of Social Security Card
- Copy of Driver License
- Copy of high school diploma or GED certificate
- Copy of Security guard license (if applicable)
- Copy of college transcripts and diploma (if applicable)
- Copy of military discharge form DD214 (if applicable)
- Copy of Applicable Certificates

\* Complete above Checklist; and read ALL Instructions and Employment Requirements \*

• 877-778-7458 • [www.prusikusa.com](http://www.prusikusa.com) •



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# PRUSIK USA LLC

## OVERVIEW

Prusik USA welcomes you to the employment hiring process. The time to complete this process depends on availability of personnel, resources and open positions. Our staff will do what is necessary to make this process as simple and streamlined as possible.

## APPLICATION INSTRUCTIONS

Type the application on a computer, or use a BLACK ball point ink pen to fill out application. Write legibly and plainly, and answer questions honestly and concise. Read each answer carefully. Answer all questions, and fill in every space. If you need additional space, either use the back of the sheet or an additional sheet. You may go to our website, [www.prusikusa.com](http://www.prusikusa.com) to download, fill out, and print the application packet

- Failure to follow instructions, or complete information, will delay the background check process or eliminate you from further processing. **Your incomplete packet will be rejected.**
- If a question does not apply write "N/A" for Not Applicable.
- Have the Employment Questionnaire and Authorization for Release Of Information forms notarized.
- Return the completed and signed application packet with any applicable certificates. **Use the Checklist on the Application Packet cover to ensure the packet is complete.**

Read the application carefully and pay attention to any included instructions. Once you have completed the application packet, return the application to the representative you received it from, or you can mail it to the address below.

Prusik USA LLC  
Human Resources Dept.  
150 N. David Ln. Ste 1013  
Muskogee, OK 74403

Tel: 877-778-7458  
Fax: 918-512-4020  
E-mail: [securityinfo@prusikusa.com](mailto:securityinfo@prusikusa.com)

Should have questions about the application packet, or the hiring process, please contact us and we will provide you with the necessary information. Applications are kept on file for ninety (90) days from the date of receipt of the application.

## EMPLOYMENT REQUIRMENTS

- Must be a U.S. citizen: Proof of citizenship required;
- Must be 18 years of age (unarmed); 21 years of age (armed);
- Must not have been convicted of any of the following:
  - A felony;
  - A crime punishable by more than 2 years of imprisonment;
  - An offense involving moral turpitude.
- Must be able to meet State security license requirements;
- Must successfully pass a thorough background investigation, at own expense;
- Must successfully pass a drug test, at own expense;
- Must be bonded: \$5,000 unarmed, and \$10,000 armed (Contractor only);
- Must have reliable transportation;
- Must be able to work assigned schedule;
- Must be able to perform duties with or without accommodation;
- Must attend training required by Prusik USA and/or client;
- Must have no criminal history of domestic violence;
- Must have good driving record, and good financial history;
- Must be professional and present a clean and neat appearance.
- \* Must be knowledgeable in basic computer skills (MS Word, MS Excel, MS OneNote, Adobe Reader, etc.) \*



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# PRUSIK USA LLC

## EMPLOYMENT QUESTIONNAIRE

Page 1 of 2

**Instructions:** Type on a computer, or use BLACK ink to complete this questionnaire, and the application packet. Read each questions carefully. Answer all questions. If a questions does not apply, write "N/A" for not applicable. Failure to complete this questionnaire will delay the hiring process.

1. Do you have reliable transportation to get to and from work?  
 Yes       No      If No, then why? \_\_\_\_\_
2. Do you have a valid and working phone number to be contacted?  
 Yes       No      If No, then why? \_\_\_\_\_
3. Do you have a valid and current driver license?  
 Yes       No      If No, then why? \_\_\_\_\_
4. Are you willing to take a drug test?  
 Yes       No      If No, then why? \_\_\_\_\_
5. Are you willing to meet our Professional Standard of appearance and conduct?  
 Yes       No      If No, then why? \_\_\_\_\_
6. Are you willing to work a flexible work schedule?  
 Yes       No      If No, then why? \_\_\_\_\_
7. Are you willing to work any hours or shifts?  
 Yes       No      If No, then why? \_\_\_\_\_
8. Are there any restrictions on the hours or shifts you can work?  
 Yes       No      If Yes, then why? \_\_\_\_\_
9. Are you willing to obtain work required license(s) and/or certificate(s)?  
 Yes       No      If No, then why? \_\_\_\_\_
10. Are you willing to attend, complete, and apply required training?  
 Yes       No      If No, then why? \_\_\_\_\_
11. Do you have basic knowledge of PC computer skills?  
 Yes       No      If Yes, what programs? \_\_\_\_\_
12. Have you ever participated in a serious crime?  
 Yes       No      If Yes, then what crime? \_\_\_\_\_

13. Have you been convicted of any misdemeanor conviction involving any illegal drugs, or marijuana?

Yes  No

14. Have you ever been convicted of DUI (Driving Under the Influence) or DWI (Driving While Intoxicated)?

Yes  No

15. Have you ever been arrested for selling of any drugs or marijuana?

Yes  No

16. Have you used any drug or marijuana within the past 3 years?

Yes  No

17. Have you any history of disregard for traffic laws with such frequency as to indicate disrespect for traffic laws and a disregard for the safety of other persons on the roadway?

Yes  No

18. Have you any sexual conduct prohibited by law?

Yes  No

19. Have you any history of negligence in maintaining financial responsibility?

Yes  No

20. Have you any information you wish to disclose to Prusik USA at this time or any time in the future, not included on this questionnaire or application, which you believe may be a disqualifying factor for employment?

Yes  No

If Yes, please list here \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

(Witnessed by Notary)

**NOTARY'S SIGNATURE**

State of \_\_\_\_\_, SS) County of \_\_\_\_\_ )

Signed and sworn to before me on \_\_\_\_\_, by \_\_\_\_\_

Notary Public \_\_\_\_\_

My Commission Number \_\_\_\_\_

My Commission Expires \_\_\_\_\_

[SEAL]



# PRUSIK USA LLC

(PLEASE TYPE or PRINT CLEARLY)

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion or national origin. Title 8, Civil Rights Act of 1964; Title 6, Civil Rights Act of 1974; Executive Order 11246; Executive Order 12067; Executive Order 11375; Executive Order 12550; Public Law 90-202; Public Law 93-112; and the Americans with Disabilities Act; as amended prohibits discrimination. The laws of some states prohibit some or all of the above mentioned types of discrimination.

Prusik USA believes in the principle and practice of equal employment opportunity, and intends to comply with the letter and spirit of federal and state (local) laws and regulations prohibiting discrimination on the basis of race, color, sex, age, religion, national origin or handicapped status. On the job discrimination against others for reasons of race, color sex, age, religion, national origin or handicapped status will be considered a violation of this principle and will not be permitted.

### An Equal Opportunity Employer

**NOTE:** Provide all information. If you attach a resume, include all information requested but omitted from resume.

## PERSONAL

Date \_\_\_\_\_

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Last First Middle Initial

Present Address \_\_\_\_\_  
No. Street City State Zip

How many years have you lived at this address? \_\_\_\_\_ Telephone No. \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Previous Address \_\_\_\_\_ How long did you live there? \_\_\_\_\_  
No. Street City State Zip

Job(s) applied for 1. \_\_\_\_\_ Rate of Pay expected \$ \_\_\_\_\_ per \_\_\_\_\_

2. \_\_\_\_\_ Rate of Pay expected \$ \_\_\_\_\_ per \_\_\_\_\_

Have you worked for Prusik USA before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

List any friends or relatives working for Prusik? \_\_\_\_\_

If hired, when will you be available to start? \_\_\_\_\_

**NOTICE:** It is the policy of Prusik USA that pre-employment physicals will include a drug screen. A positive finding will preclude your employment with the company. If a positive finding is the result of a prescription drug prescribed by your physician, your employment with the company will not be affected.

I have read the above notice and hereby state that I understand same:

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\* Have you ever been convicted of a felony crime?  No  Yes

If yes, describe in full \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person to be notified in case of an accident or emergency:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_  
No. Street City State Zip

# TO THE APPLICANT:

Do not answer any question contained in THIS blocked-off area unless the box next to the question is checked, thereby indicating that the requested information is needed for a bona fide occupational qualification, national security laws, or other legally permissible reasons.

Are you over the age of twenty-one? \_\_\_\_\_ If no, you are subject to verification that you are of minimum legal age.

Height: \_\_\_\_\_ Ft. \_\_\_\_\_ In. Weight: \_\_\_\_\_  Are you a citizen of the USA? \_\_\_\_\_

Have you ever been bonded? \_\_\_\_\_ If yes, on what jobs? \_\_\_\_\_

Sex:  M  F What is your present Selective Service classification? \_\_\_\_\_

Marital Status:  Single  Engaged  Married  Separated  Divorced  Widowed

Date of Marriage \_\_\_\_\_ Number of dependents including yourself \_\_\_\_\_

Indicate dates you attended school:

Elementary \_\_\_\_\_ High School \_\_\_\_\_ College \_\_\_\_\_  
From To From To From To

Other (Specify type of School) \_\_\_\_\_  
From To

## EDUCATION BACKGROUND

ELEMENTARY SCHOOL: \_\_\_\_\_  
Name and address of school

Last year completed:  5  6  7  8 Did you graduate?  No  Yes

HIGH SCHOOL: \_\_\_\_\_  
Name and address of school

Last year completed:  9  10  11  12 Did you graduate?  No  Yes  
If no, did you earn a GED?  No  Yes

VOCATIONAL SCHOOL: \_\_\_\_\_  
Name and address of school

Last year completed:  1  2  3  4 Did you graduate?  No  Yes

Course of Study: \_\_\_\_\_ List Diploma or Degree: \_\_\_\_\_

COLLEGE/ UNIVERSITY: \_\_\_\_\_  
Name and address of school

Last year completed:  1  2  3  4 Did you graduate?  No  Yes

Course of Study: \_\_\_\_\_ List Diploma or Degree: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

OTHER (Specify): \_\_\_\_\_  
Name and address of school

Last year completed:  1  2  3  4 Did you graduate?  No  Yes

Course of Study: \_\_\_\_\_ List Diploma or Degree: \_\_\_\_\_

**MILITARY SERVICE RECORD**

Were you in the U.S. Armed Forces?  No  Yes If yes, what Branch? \_\_\_\_\_

Dates of duty: From \_\_\_\_\_ To \_\_\_\_\_ Rank at discharge \_\_\_\_\_  
Month Day Year Month Day Year

List duties in Service: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List special training you received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List ribbons, medals, awards, and recognition you received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever taken any training under the Montgomery G.I. Bill? \_\_\_\_\_ If yes, what training did you take? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL LICENSES / CERTIFICATES / REGISTRATIONS**

List any Licenses, Certificates, or Credentials (submit copies with application): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List types of computers, software, and other equipment you are qualified to operate: \* See Employment Requirements \*  
\_\_\_\_\_  
\_\_\_\_\_

Additional skills or qualifications, including customer service and/ or supervision skills, other languages or information regarding the career/ occupation, which you feel would especially fit you for work with Prusik USA?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





**PERSONAL REFERENCES**

NAME AND OCCUPATION

ADDRESS

PHONE NUMBER

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

You may use the space below to summarize any additional information necessary to describe your full qualifications.

\_\_\_\_\_  
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Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with Prusik USA will be based on your merit and ability. We believe in the principle and practice of equal employment opportunity, and intend to comply with the letter and spirit of federal, state and local laws and regulations prohibiting discrimination on the basis of race, color, sex, age, religion, national origin or handicapped status.

**PLEASE READ CAREFULLY  
APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice. \*

**Signature of Applicant:** \_\_\_\_\_ **Date** \_\_\_\_\_

\* **NOTE:** The provisions of the Fair Credit Reporting Act may be applicable if a credit report on the applicant is obtained and considered.

### Authorization for Release of Information

(PLEASE PRINT CLEARLY)

TO: Any Doctor, Physician, Psychologist, Psychiatrist, Dentist, Hospital, Nursing Home, or Medical Association;

The US Armed Forces, Maritime Service, Veteran's Administration, Selective Service Administration;

Any Academic Dean, Registrar, Principal, Guidance Counselor or authorized person at any School, College, University, Business School, Trade School, Elementary or High School;

Any local, State, or Federal Law Enforcement Agency; any past or present employer; any Credit Bureau or Retail Merchants Association; any insurance company.

I, \_\_\_\_\_, have applied for employment with Prusik USA security firm. I am aware that my entire background will be thoroughly investigated and I hereby authorize and request the release of any and all information you may have that concerns me, including academic transcripts and disciplinary matters, to a representative of Prusik USA. This authorization or a reproduction thereof shall be valid for two years from the date of execution of this document.

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Selective Service #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Veteran's Administration File #: \_\_\_\_\_

Armed Forces Membership: \_\_\_\_\_ Service #: \_\_\_\_\_

Given under my hand, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
**Applicant's Signature** (Witnessed by Notary) Phone #: \_\_\_\_\_

Current Address No. Street City State Zip

#### NOTARY'S SIGNATURE

State of \_\_\_\_\_, SS) County of \_\_\_\_\_ )

Signed and sworn to before me on \_\_\_\_\_, by \_\_\_\_\_

Notary Public \_\_\_\_\_ My Commission Number \_\_\_\_\_

My Commission Expires \_\_\_\_\_

[SEAL]