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APPLICANT INTEREST CARD

PERSONAL INFORMATION

FULL NAME: _____ DATE: _____
 HOME PH# _____ CELL PH# _____ D.O.B: _____
 ADDRESS: _____ CITY: _____
 STATE: _____ ZIP: _____ EMAIL: _____

POSITION APPLYING FOR

SECURITY OFFICER	
EVENT STAFF	
DISPATCH / RECEPTIONIST	
OTHER:	

CHECK ALL THAT APPLY

<input type="checkbox"/>	GUARD CARD PERMIT#	<input type="checkbox"/>	DRIVERS LICENSE
<input type="checkbox"/>	FIREARM PERMIT#	<input type="checkbox"/>	PC 831 OR 832
<input type="checkbox"/>	BATON	<input type="checkbox"/>	OTHER:
<input type="checkbox"/>	CHEMICAL AGENT	<input type="checkbox"/>	OTHER:

QUESTIONS:

Are you prior law enforcement?	YES _____ OR NO _____
If yes, what department	

ARE YOU PRIOR MILITARY?	YES _____ OR NO _____
IF YES, WHAT BRANCH?	

DO YOU HAVE RELIABLE TRANSPORTATION?	YES _____ OR NO _____
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WHATS YOUR AVAILABILITY?

	<u>MON</u>	<u>TUES</u>	<u>WED</u>	<u>THUR</u>	<u>FRI</u>	<u>SAT</u>	<u>SUN</u>
<u>DAYS</u>							
<u>TIMES</u>							