

This application may be submitted to Centurion Security by email at [admin@securityutah.com](mailto:admin@securityutah.com),  
by fax at 801-222-0980 or in person at 3507 N University Ave, #150, Provo, UT 84604



# Centurion Security, LLC

## Application for Employment

Pre-employment Questionnaire: EOE

### Personal Information

Name (Last Name, First Name)		Date	
Present Address	City	Zip	
Mailing Address (if different)	City	Zip	
Home Phone	Cell Phone		
E-mail Address			

### Employment Desired

Position	Date You Can Start	Salary Desired
Are You Currently Employed?	May We Inquire Of Your Present Employer?	Applied With Centurion Before?

### Education History

High School Name	Location	# of Years Attended	Graduate?	
College				
Trade/Business School				

### General Information

Subjects of Special Interest / Study / Research / Training	
U.S. Military or Naval Service	Rank

**Former Employers (List Last Four Employers, Beginning With The Most Recent)**

From:	Name & Address of Employer	Salary	Position	
To:				
Reason For Leaving				
From:				
To:				
Reason For Leaving				
From:				
To:				
Reason For Leaving				
From:				
To:				
Reason For Leaving				

**References: Give below the names of three persons not related to you, whom you have known for at least one year.**

Name	Address / Phone:	Occupation:	Years Known

Authorization: "I, the undersigned, certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Date: \_\_\_\_\_

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