

Eastern Missouri Police Academy

**St. Charles County  
Security License Application**

The position of security officer/watchman is a position of responsibility and trust. The questions asked on this form are requested in order to complete a background investigation. All the following information **MUST** be completed honestly and correctly: Personal Data and Arrest History.

Read every question carefully and answer each question accurately. All entries, except signature, must be printed legibly using black ink. If a question does not apply to you, write N/A in the space.

All records are filed with the Eastern Missouri Police Academy. These records may and can be inspected at any time by law enforcement or government officials. Any false, misleading, or incomplete information substituted for accurate information may be grounds to disqualify you for a security license.

Please confirm that you have read and understood the above by signing below.

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

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

## Authorization for Release of

### Information Read Carefully Before Signing

I, (Print FULL Name) \_\_\_\_\_ hereby certify that all statements made on or in connection with this application are true and complete to the best of my knowledge and belief. I understand and agree that any misstatements or omission of material facts will cause forfeiture on my part of all rights to employment as a licensed Security Officer in St. Charles County.

I hereby authorize all law enforcement agencies, all federal, state, or local government agencies, schools, and universities to furnish the holder of this release with all and any available information regarding me in order that they may determine my suitability for security work.

I authorize the holder of this release to make inquiry of my present and past employers regarding my character, integrity and reputation.

I authorize the release of any and all information regarding my employment, arrest, conviction record, or any other information, whether personal or otherwise, that may or may not be on their records, and release said company or person from liability for any damage, whatsoever, that may issue from furnishing such information to the holder of this release. This applicant questionnaire may be released to any police agency or security agency.

A photocopy, electronic copy, or faxed copy of this authorization will be considered as effective and valid as the original.

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

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

Please PRINT: (All information must be completed and accurate)						
Last Name:			First Name:		Middle Name	
Street Address			City		State	Zip Code
Home Phone Number:			Cell Phone Number:		Business Phone Number:	
Age	Height	Weight	Hair Color	Eye Color	DOB	Place of Birth
Social Security Number:					Driver's License Number and State:	

## Eastern Missouri Police Academy

<b>Section 1: Personal Data</b>						
Last Name:		First Name:			Middle Name	
Street Address		City			State	Zip Code
Home Phone Number:		Cell Phone Number:			Business Phone Number:	
Age	Height	Weight	Hair Color	Eye Color	DOB	Place of Birth
Social Security Number:				Driver's License Number and State:		
Are you a citizen of the United States?      Yes      No				Were you naturalized?      Yes      No		
List any other names you have ever used:						
<b>Section 2: Hiring Company Information</b>						
Company Name:				Company Address:		
Supervisor:				Phone Number:		
Have you ever held a security license?      Yes      No						
If Yes, please list when and where:						
Have you ever received any security training?      Yes      No						
If Yes, please list when and where:						
<b>Section 3: Background Information</b>						
Have you ever been denied a security license:      Yes      No						
If Yes, please list when, where and why you were denied:						

## Eastern Missouri Police Academy

Have you ever been released from employment, either military or civilian, for illegal or immoral conduct?	Yes	No
If Yes, please explain:		
Have you EVER served in the Military? If Yes, we need a copy of a current military ID or DD214 or equivalent	Yes	No
Have you EVER been a certified Peace Officer? If so, we will need your POST License Number	Yes	No
Has your POST License EVER been suspended or revoked?	Yes	No
If Yes, please explain:		
Have you ever been convicted of any offense involving domestic violence?	Yes	No
If Yes, please explain:		
Have you EVER been convicted of a felony (felony conviction or felony SES)?	Yes	No
If Yes, please explain		
Are you currently on probation or parole?	Yes	No
If Yes, please explain:		
Do you have any criminal charges pending?	Yes	No
If Yes, please explain:		

# Eastern Missouri Police Academy

## Section 4: Arrest History

List ALL arrests. Failure to list ANY arrest record will be a basis of denial of the application for licensing. A Felony conviction is an automatic denial.

Date	Charge	County/State	Disposition

## Section 5: Supplemental Information