

COMPANY LICENSE NUMBER

ALARM EMPLOYEE RENEWAL APPLICATION

FOR OFFICE USE ONLY
EFFECTIVE 11-2011

EXPIRES: _____

PLEASE TYPE OR PRINT LEGIBLY

NAME OF COMPANY: _____

NAME: _____ SSN: _____
Last First MI

APPLICANT ADDRESS: _____
& Street or P.O. Box City County State/ZIP

RACE: _____ SEX: _____ HGT: _____ WGT: _____ HAIR: _____ EYES: _____ DOB: _____

DRIVER'S LICENSE#: _____ HOME PHONE: _____

CELL PHONE: _____

PLACE OF BIRTH: _____
CITY COUNTY STATE COUNTRY

IF BORN OUTSIDE THE UNITED STATES, PLEASE SUBMIT ONE OF THE FOLLOWING: **WORK PERMIT, PERMANENT RESIDENT CARD OR NATURALIZATION PAPERS.**

PLACE AN "X" IN THE SQUARE NEXT TO THE TYPE OF REGISTRATION, FOR WHICH YOU ARE RENEWING. **ALL APPLICANTS MUST HAVE A CURRENT BACKGROUND CHECK DATED WITHIN SIX MONTHS FROM THEIR LAST BACKGROUND CHECK. IF YOUR BACKGROUND CHECK ISN'T CURRENT,** A TOTAL OF \$41.25 FOR BOTH, THE STATE BACKGROUND CHECK (\$22.00), FEDERAL BACKGROUND CHECK (\$17.25 + \$2.00), AND TWO FINGER PRINT CARDS **MUST BE INCLUDED WITH THE RENEWAL FEES.**

IF YOUR REGISTRATION IS EXPIRED, DO NOT USE THIS APPLICATION. YOU WILL NEED TO BEGIN THE APPLICATION PROCESS WITH A NEW ALARM EMPLOYEE APPLICATION.

- | | | | | |
|--------------------------|--------------------------------|-----|---------|------------|
| <input type="checkbox"/> | ALARM SYSTEMS TECHNICIAN | FEE | \$40.00 | CODE 20005 |
| <input type="checkbox"/> | ALARM SYSTEMS MONITOR | FEE | \$40.00 | CODE 20005 |
| <input type="checkbox"/> | ALARM SYSTEMS AGENT | FEE | \$40.00 | CODE 20005 |
| <input type="checkbox"/> | STATE BACKGROUND CHECK | FEE | \$22.00 | CODE 82006 |
| <input type="checkbox"/> | FEDERAL BACKGROUND CHECK (FBI) | FEE | \$17.25 | CODE 80005 |
| <input type="checkbox"/> | FEDERAL BACKGROUND CHECK (FBI) | FEE | \$2.00 | CODE 80006 |

DATE REGISTRATION CARD EXPIRES: _____

DATE THIS APPLICATION WAS COMPLETED: _____

**WARNING TO APPLICANT:
PROVIDING FALSE INFORMATION ON THIS FORM IS A VIOLATION OF ARKANSAS LAW
AND PUNISHABLE AS SET FORTH IN ARKANSAS CODE 5-53-103.**

APPLICANT MUST LIST ALL CONVICTIONS OF A **FELONY, CLASS "A" MISDEMEANOR, CRIME INVOLVING AN ACT OF VIOLENCE OR CRIME INVOLVING MORAL TURPITUDE**. IF THE APPLICANT HAS BEEN CONVICTED, HE OR SHE MUST ATTACH DOCUMENTATION CERTIFIED BY THE COURT AS TO THE DISPOSITION OF THE CHARGE. THE APPLICANT MUST ALSO LIST ANY CRIMINAL CHARGES NOW PENDING OR ON APPEAL.

CHECK APPLICABLE BOX:

NONE, I HAVE NO CONVICTIONS TO REPORT.

YES, I HAVE A CONVICTION(S) TO REPORT. SEE BELOW FOR INFORMATION REGARDING CONVICTION(S).

Charge	Location	Date	Disposition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

THE APPLICANT STATES ON OATH THAT THE REPRESENTATIONS MADE HEREIN ARE TRUE AND CORRECT AND THAT THE APPLICANT WILL UPHOLD THE CONSTITUTIONS OF THE UNITED STATES AND THE STATE OF ARKANSAS.

SIGNED: _____ **DATE:** _____

STATE OF _____

§

COUNTY OF _____

Subscribed and sworn to before me, a Notary Public in and for the county and state aforesaid, this the _____ day of _____ 20____.

Notary Public

DO NOT WRITE IN THE SPACES BELOW

FOR BOARD USE ONLY

I.D. BUREAU

RECORD

NO RECORD

C.I.D.

NCIC

WANTED

NOT WANTED

TRAFFIC RECORD

NO TRAFFIC RECORD

Signature of person making inquiry: _____ Date: _____