

ALASKA DEPARTMENT OF PUBLIC SAFETY
APPLICATION FOR LICENSE AS A SECURITY GUARD

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THIS APPLICATION MUST BE TYPED OR PRINTED IN BLACK INK

TO THE AGENCY

Attach to this application:

1. Check or money order for \$50.00 payable to *State of Alaska*;
2. Check or money order for \$51.50 payable to *Department of Public Safety*;
3. Proof of insurance;
4. A recent (within 30 days) photograph of the applicant taken from the *waist up*;
5. Two sets of classifiable fingerprints; and
6. ***For armed guards only*** - A copy of the firearm qualifications/certification. (13 AAC 60.045(1)(3))

Today's date _____ (for office use only) *APSIN / TRACKING #* _____

1. Unarmed Armed (date of certification) _____ 2. *Alaska Driver's License/State ID #* _____

3. Applicant _____
(**first name**)(**full middle name- write NMN if no middle name or MIO if initial only**)(**last name**)

4. Date of birth _____ 5. Social Security number _____

6. Sex: M F 7. Height _____ 8. Weight _____ 9. Hair color _____ 10. Eye color _____

11. Residence address _____
(number, street **or in outlying areas, brief description of physical address**) (city) (zip)

12. Residence telephone _____ Cell Phone _____

13. Mailing address _____
(number, street, or post office box) (city) (zip)

14. Security guard agency _____ 15. Agency telephone _____

16. Agency mail address _____
(number, street, or post office box) (city) (zip)

17. Place of birth _____
(city) (state) (country if not USA)

18. Are you a citizen of the United States of America? Yes No If no, Alien number on Resident Alien Card issued by U.S. Department of Justice Immigration and Naturalization Service:
Number _____ Expiration date _____

19. Military service (***Complete only if not in active service***)
Branch, discharge date, and type of discharge _____

20. (a) Have you ever been licensed as a security guard in Alaska? Yes No If yes, list agency name(s) and dates employed: _____

(b) Have you ever been denied issuance of an Alaska security guard license, or have you ever had a license suspended or revoked? Yes No If yes, explain charges, places, dates, and decision on a separate sheet of paper and attach to this application.

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21. **List all information (charge, date, place, and decision) about arrests and convictions including traffic citations, by a court of this state, the United States, another state or territory, or the military, occurring during the 10 YEARS immediately preceding the date of this application. (DO NOT LEAVE THIS SECTION BLANK OTHERWISE THE APPLICATION WILL NOT BE ACCEPTED BY THE DEPARTMENT).**

22. **RESIDENCE INFORMATION:** List all residences for the **FIVE YEARS** immediately preceding the date of this application. Start with your present address and work back. Attach a separate sheet of paper if necessary.

| Dates of residence | Address (in outlying areas, brief description of physical address) | City | State | Zip |
|-----------------------|--|-------|-------|-------|
| From _____ to present | _____ | _____ | _____ | _____ |
| From _____ to _____ | _____ | _____ | _____ | _____ |
| From _____ to _____ | _____ | _____ | _____ | _____ |
| From _____ to _____ | _____ | _____ | _____ | _____ |

23. **EMPLOYMENT HISTORY:** List all employment for the **FIVE YEARS** immediately preceding the date of this application. Start with your present or most recent job and work back. Include full-time and part-time work. Attach a separate sheet of paper if necessary.

| Dates of employment | Employer | Address, city, state, zip | Telephone |
|-----------------------|----------|---------------------------|-----------|
| From _____ to present | _____ | _____ | _____ |
| From _____ to _____ | _____ | _____ | _____ |
| From _____ to _____ | _____ | _____ | _____ |
| From _____ to _____ | _____ | _____ | _____ |

24. **REFERENCES:** List the names, mail addresses, and telephone numbers of three persons, at least one of whom is a resident of Alaska (not related to you) who can attest to your good character.

| Name | Address, city, state, zip | Telephone |
|-------|---------------------------|-----------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

25. (a) Are you the subject of a domestic violence injunction/order issued after a hearing for which you received actual notice and had an opportunity to participate? Yes No If yes, attach a copy of the order to this application.

(b) Have you ever been convicted of the crime of domestic violence assault? Yes No If yes, explain charges, places, dates, and decision on a separate piece of paper and attach to this application.

(c) Have you ever been convicted of a felony in this state or another state or territory? Yes No

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CERTIFICATION: I swear or affirm that all information on this application is true and complete to the best of my knowledge and belief. I understand that any intentional misrepresentation or concealment of material fact will be sufficient grounds for rejection of my application, and if I deliberately conceal or enter false information on this application, such conduct is punishable as a crime under Alaska law.

I agree that the Department of Public Safety, its employees or agents, may contact former employers or other persons who know me in order to obtain additional information about my qualifications.

I am free from any psychopathic condition or mental illness that may impair my powers of memory, reason, judgement, or perception and that may adversely affect my performance as a security guard.

I am neither addicted to nor dependent on alcohol, narcotics, or other drugs.

I have read and understand AS 18.65.400--AS 18.65.490 and 13 AAC 60.010--13 AAC 60.900.

I have not been and am not now disqualified from possessing a firearm, including as a condition of probation or parole.

Date
Signature of applicant for security guard license
Subscribed and sworn to or affirmed before me at _____, Alaska,
(city)

(date)

(SEAL) _____
Clerk of Court, Notary Public, or other person authorized to administer oaths.
My commission expires: _____

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

The undersigned agency, having made application to the Department of Public Safety to employ _____ as a security guard on a temporary basis pending issuance of the applicant's license, hereby affirms that it has made reasonable and prudent inquiries to determine whether the applicant is qualified to be licensed under AS 18.65.400 – AS 18.65.490 and 13 AAC 60.010 -- 13 AAC 60.900.

The applicant has been employed on a temporary basis pending issuance of the applicant's security guard license and has received the training required by 13 AAC 60.110.

The agency hereby agrees to indemnify and hold harmless the State of Alaska and its agents or employees from all claims brought because of injuries received by any person resulting from the negligent or intentional acts of the applicant while employed by the agency.

Date
Signature of qualified agent or manager
Printed or typed name _____
Agency _____
Subscribed and sworn to or affirmed before me at _____, Alaska,
(city)

(date)

(SEAL) _____
Clerk of Court, Notary Public, or other person authorized to administer oaths.
My commission expires: _____