



# APPLICATION FOR SECURITY GUARD

1551 N. 17th Avenue  
Greeley, CO 80631

970-350-9627  
970-304-6505 fax

<input type="checkbox"/>	New License
<input type="checkbox"/>	Renewal
<input type="checkbox"/>	Armed
<input type="checkbox"/>	Unarmed

## GENERAL INFORMATION

1. Name of Individual: \_\_\_\_\_
  2. Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_
  3. Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Place of Birth: \_\_\_\_\_
  4. Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eyes: \_\_\_\_\_ Hair: \_\_\_\_\_
  5. Address of Individual: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
  6. Home telephone number: \_\_\_\_\_ Business telephone number: \_\_\_\_\_
  7. Name of firm(s) employing applicant: \_\_\_\_\_
  8. Address of firm(s): \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
  9. Previous Employment for the past ten years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  10. List all of your arrests, felony, misdemeanor, and traffic charges. Please list dates, charge, location, convictions, dispositions, and sentences:  
\_\_\_\_\_  
\_\_\_\_\_
  11. List details if applicant has ever had a judgment or conviction for fraud, deceit or misrepresentation.  
\_\_\_\_\_
- Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

## ARMED GUARD APPLICANTS ONLY COMPLETE THE FOLLOWING

Firearm furnished by \_\_\_\_\_  
 Make \_\_\_\_\_ Model \_\_\_\_\_ Caliber \_\_\_\_\_ Serial# \_\_\_\_\_  
 Approved \_\_\_\_\_ Date \_\_\_\_\_

ALL INFORMATION MUST BE COMPLETED - Illegible and/or incomplete applications will be rejected



APPLICATION FOR LICENSE

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**AUTHORITY FOR RELEASE OF INFORMATION**

Name \_\_\_\_\_  
(Last) (First) (Middle)

Sex \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Month/Day/Year

I, \_\_\_\_\_, do hereby authorize a review and full disclosure of all records specified below, or any part thereof, concerning myself, by and to ANY duly authorized agent of the City of Greeley, Greeley Police Department, or Private investigator working as an agent of the City of Greeley for purposes of the application, whether the said records are of Criminal Justice, public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of financial or credit institutions, including records of deposits, withdrawals and balances of checking and savings accounts, and loans, and also the records of commercial or retail credit agencies (including credit reports and/or ratings); real and personal property tax statements and records, and other financial statements and records wherever filed; records of complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal, civil and/or traffic records; records of complaint of a civil nature made by or against me, whosesoever located.

I understand that all information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part, upon this release authorization will be considered in determining my suitability for licensing by the City of Greeley, Finance Department. I understand that all materials pertaining to this background investigation become the property of the City of Greeley, Finance Department and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is not approved, the sources of confidential information will not be revealed to me.

A photocopy of this signed release form will be considered valid as an original hereof.  
MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

\_\_\_\_\_  
Affiant's Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Seal) Notary Public

\_\_\_\_\_  
Expiration Date

(Notary



# AFFIDAVIT OF LAWFUL PRESENCE

I, \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of the State of Colorado that (check one):

\_\_\_ I am a United States citizen, or

\_\_\_ \* I am a Permanent Resident of the United States, or

\_\_\_ \* I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute § 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*If Affiant affirms that he/she is either a Permanent Resident or otherwise lawfully present in the United States, please have Affiant complete the S.A.V.E. verification form and forward both forms to H.R. for verification of lawful presence in the S.A.V.E. program.

- For internal use only:**  
**IDENTIFICATION PROVIDED**
- \_\_\_ Current Colorado Driver’s License or Permit
  - \_\_\_ United States passport
  - \_\_\_ Current Colorado Identification Card Issued by Department of Motor Vehicles
  - \_\_\_ United States Military ID/Common Access Card
  - \_\_\_ United States Military Dependent Identification Card
  - \_\_\_ United States Coast Guard Merchant Mariner Card
  - \_\_\_ Native American Tribal Document
  - \_\_\_ Out of State DL/ID from any state except Alaska, Illinois, New Mexico, Utah, or Washington.
  - \_\_\_ Out of State DL/ID that says “Enhanced”
  - \_\_\_ Foreign passport with photo, US Visa, I-94
  - \_\_\_ Certificate of Naturalization w/photo less than 20 years old
  - \_\_\_ Certificate of Citizenship w/photo less than 20 years old

- For internal use only:**  
**ALTERNATE I.D. REQUIREMENTS**
- If applicant can not produce one of the identification documents listed at left, please refer to Attachments A and B of the Department of Revenue’s “Rules for Evidence of Lawful Presence” located at U:\City Attorney\Immigration
- Questions? contact the City Attorney’s office.

**S.A.V.E. VERIFICATION FORM**

Pursuant to Section 24-76.5-103 of the Colorado Revised Statutes, the City of Greeley must verify that individuals who apply for public services from the City are lawfully present in the United States. If an Applicant executes the Affidavit stating that he or she is an Alien lawfully present in the United States, the City of Greeley must verify such lawful presence through the federal Systematic Alien Verification of Entitlement program ("SAVE program"). This verification program is operated by the United States Department of Homeland Security.

The following information is required in order for the City to perform the SAVE program verification. In addition, please affix to this form a legible copy of your identification or other documentation which demonstrates lawful presence in the United States.

**Name** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

- City Benefit requested:**
- Food Tax Rebate
  - Water and Sewer Department Rebate
  - Commercial/Professional License
  - Liquor License
  - Loan (including Historic Preservation loans)
  - Grant
  - Emergency Assistance

**For internal use only:**  
Requesting Department \_\_\_\_\_  
Staff contact \_\_\_\_\_  
Forward the Affidavit, SAVE Verification form, and copy of appropriate identification documents to H.R.

**H.R. use only:**  
\_\_\_ S.A.V.E. verification performed  
    \_\_\_ Affiant is lawfully present in the United States  
    \_\_\_ Affiant is not lawfully present in the United States  
  
\_\_\_ Documents returned to originating Department.