



Peregrine Enforcement Employment Application

Currently Mail-Only Address

12020 Shamrock Plz Suite 201 #919534
Omaha, Nebraska
Email: PEC-NEB@outlook.com
Phone: 1-844-966-6248
Website: pec-neb.com

Applicant Information

Full Name: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ ZIP: _____ Social Security Number: _____

Phone Number: _____ Email Address: _____

Position Applied For: ☐ Security Officer ☐ Roadside Assistance ☐ Supervisor ☐ Administrative

☐ Other: _____

Are you legally eligible to work in the United States? ☐ Yes ☐ No

Have you ever worked for Peregrine Enforcement before? ☐ Yes ☐ No

If yes, when? _____

Do you have a valid driver's license? ☐ Yes ☐ No

State Issued: _____ License Number: _____ Expiration Date: _____

Do you have reliable transportation? ☐ Yes ☐ No

Desired Employment Type: ☐ Full-Time ☐ Part-Time ☐ On-Call ☐ Temporary

Availability

Preferred Shift(s): we use 10-12 hr shifts - work with you on part-time

- ☐ Day
- ☐ Night
- ☐ Weekends
- ☐ Holidays
- ☐ Flexible

Are you willing to work overtime if required? ☐ Yes ☐ No

Date Available to Start: _____

Education

School Name	Location (City, State)	Years Attended	Degree/Diploma	Major/Field of Study
High School				
College/University				
College/University				
Trade/Technical School				
Trade/Technical School				
Other				
Other				

Employment History

List your last three employers, starting with the most recent.

Employer Name: _____

Address: _____

Phone: _____

Supervisor Name: _____

Job Title: _____

Dates Employed: From _____ To _____

Reason for Leaving: _____

May we contact this employer? ☐ Yes ☐ No

Employer Name: _____

Address: _____

Phone: _____

Supervisor Name: _____

Job Title: _____

Dates Employed: From _____ To _____

Reason for Leaving: _____

May we contact this employer? ☐ Yes ☐ No

Employer Name: _____

Address: _____

Phone: _____

Supervisor Name: _____

Job Title: _____

Dates Employed: From _____ To _____

Reason for Leaving: _____

May we contact this employer? ☐ Yes ☐ No

Military Service

Branch: _____

Rank at Discharge: _____

Dates of Service: From _____ To _____

Type of Discharge: _____

If other than honorable, please explain:

Certifications and Training

- ☐ CPR/First Aid
- ☐ Defensive Driving
- ☐ Firearms Qualification
- ☐ De-escalation/Conflict Resolution
- ☐ Emergency Vehicle Operations
- ☐ Other: _____

List any additional relevant training, certifications, or skills:

References

Provide three professional references not related by family.

Name	Relationship	Company	Phone	Email

Background Information

Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, please explain: _____

Have you ever been convicted of a DUI? ☐ Yes ☐ No

If yes, please explain: _____

Have you ever been convicted of any drug-related issues? ☐ Yes ☐ No

If yes, please explain: _____

Have you ever used marijuana in the last two years? ☐ Yes ☐ No

If yes, please explain: _____

Have you ever been terminated or asked to resign from a job? ☐ Yes ☐ No

If yes, please explain: _____

Are you currently certified or licensed as a security officer in any state? ☐ Yes ☐ No

If yes, list state(s):

Are you currently certified or licensed as a Private Protection officer/specialist in any state?

☐ Yes ☐ No If yes, list state(s): _____

Are you currently certified or licensed as a law enforcement officer in Nebraska? ☐ Yes ☐ No

Are you currently certified or licensed as a _____ in any state? ☐ Yes ☐ No

If yes, list state(s):

Do you have any physical limitations that would prevent you from performing essential job duties? ☐ Yes ☐ No

If yes, please describe: _____

Emergency Contact

Peregrine Enforcement, LLC is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability, or veteran status.