

Past 10 Years

1. Name of Employer (Print)	2. Phone Number (include area code) ()
3. Street Address	4. City, State, Zip
5. Job Title	6. Dates of Employment (from MM/YY to MM/YY)
7. Exact Duties which <u>Relate</u> to the License Sought and Percentage of Time Devoted to These Duties. BE SPECIFIC.	
8. Name and Title of Individual who can Verify Employment	
9. Phone Number (include area code) ()	
1. Name of Employer (Print)	2. Phone Number (include area code) ()
3. Street Address	4. City, State, Zip
5. Job Title	6. Dates of Employment (from MM/YY to MM/YY)
7. Exact Duties which <u>Relate</u> to the License Sought and Percentage of Time Devoted to These Duties. BE SPECIFIC.	
8. Name and Title of Individual who can Verify Employment	
9. Phone Number (include area code) ()	

UTILIZE ADDITIONAL SHEETS IF NECESSARY

I, _____, applicant for licensing in the State of North Dakota, authorize direct contact to be made with the company/department representative of all my employers and any other persons from the company to provide input on my employment history. I understand this contact will be made to discuss specific duties, job performance and any other information necessary in determining my suitability for licensing by the North Dakota Private Investigation & Security Board. Additionally, verification of education and licensure from other jurisdictions is granted by said applicant.

Applicant's signature: _____ Date: _____