

COMPANY LICENSE NUMBER

NEW EMPLOYEE NOTIFICATION

PLEASE TYPE

WE, _____,
(Name of Company)

HAVE EMPLOYED THE FOLLOWING INDIVIDUALS WITH OUR FIRM:

1. _____ DATE OF HIRE: _____
(Name of Employee) (SS Number)
2. _____ DATE OF HIRE: _____
3. _____ DATE OF HIRE: _____
4. _____ DATE OF HIRE: _____
5. _____ DATE OF HIRE: _____
6. _____ DATE OF HIRE: _____
7. _____ DATE OF HIRE: _____
8. _____ DATE OF HIRE: _____
9. _____ DATE OF HIRE: _____
10. _____ DATE OF HIRE: _____
11. _____ DATE OF HIRE: _____
12. _____ DATE OF HIRE: _____
13. _____ DATE OF HIRE: _____
14. _____ DATE OF HIRE: _____
15. _____ DATE OF HIRE: _____

I HEREBY CERTIFY TO THE ARKANSAS BOARD OF PRIVATE INVESTIGATORS AND PRIVATE SECURITY AGENCIES THAT THE ABOVE NAMED INDIVIDUALS ARE EMPLOYED BY MY FIRM AND THEIR DATES OF EMPLOYMENT ARE TRUE TO THE BEST OF MY KNOWLEDGE.

(Manager/Owner)

(Date)