HR Information Form

Employee Info

FIRST NAME	MIDDLE NAME	LAST NAME
Prerna		Mittal

PHONE NUMBER	EMAIL ADDRESS	JOB TITLE
408-921-1021	prernamittal97654@gmail.com	Security Officer

Address

2245 Laurel Ave Apt 58

CITY	STATE	ZIP
San Jose	CA	95122

Licensing

BSIS GUARD CARD #	GUARD CARD EXPIRY	FIREARMS PERMIT
6854337	08/31/2027	No

DRIVER'S LICENSE #	DL EXPIRY
U0732414	07/25/2031

Employment

HIRE TYPE	EMPLOYMENT STATUS	DATE OF HIRE
New Hire	Full-Time	08/27/2026

PAY RATE	PAY FREQUENCY	JOB SITE
22.00	Weekly	

Work Schedule

		START	END
☐	MON		
☐	TUE		
☐	WED		
☐	THU		

	START	END
☐ FRI		
☐ SAT		
☐ SUN		

HR Representative

EMPLOYER / HR REPRESENTATIVE NAME

Rachel Resurreccion

Company Details

COMPANY NAME	EIN	STATE TAX ID (ENTITY ID)
Hammer Head Security Inc	61-1818820	3922058