



Please fax application to
(803) 227-2690



EMPLOYMENT APPLICATION

1. POSITION APPLYING FOR: _____

2. APPLICANT INFORMATION:

Name: _____

Address: _____

City: _____

State: _____ ZIP: _____

SSN: _____ - _____ - _____

Home Phone: _____

Other Phone: _____

Email: _____

3. EDUCATION:

High school diploma: Yes No

College degree: Yes No

If Yes: Type of degree/major: _____

School name: _____

Year of graduation: _____

If No, years completed (if any): _____

4. JOB-RELATED TRAINING:

List any courses completed, and certificates or licenses obtained which are related to the job you seek.

5. WORK EXPERIENCE:

Describe your work experience in detail, beginning with your current or most recent job. Include military service. Explain any gaps in employment. All information in this section must be completed. A resume may be attached, but not substituted.

Name of current or last employer: _____
Address: _____
From: _____ thru _____ Supervisor's Name: _____
Supervisor's Phone: _____ Email: _____
Job title: _____ Salary: _____
Job duties:

Reason for leaving:
May we contact this employer? Yes No

Name of previous employer: _____
Address: _____
From: _____ thru _____ Supervisor's Name: _____
Supervisor's Phone: _____ Email: _____
Job title: _____ Salary: _____
Job duties:

Reason for leaving:
May we contact this employer? Yes No

Name of previous employer: _____
Address: _____
From: _____ thru _____ Supervisor's Name: _____
Supervisor's Phone: _____ Email: _____
Job title: _____ Salary: _____
Job duties:

Reason for leaving:
May we contact this employer? Yes No

Name of previous employer: _____

Address: _____

From: _____ thru _____ Supervisor's Name: _____

Supervisor's Phone: _____ Email: _____

Job title: _____ Salary: _____

Job duties:

Reason for leaving:

May we contact this employer? Yes No

Name of previous employer: _____

Address: _____

From: _____ thru _____ Supervisor's Name: _____

Supervisor's Phone: _____ Email: _____

Job title: _____ Salary: _____

Job duties:

Reason for leaving:

May we contact this employer? Yes No

Name of previous employer: _____

Address: _____

From: _____ thru _____ Supervisor's Name: _____

Supervisor's Phone: _____ Email: _____

Job title: _____ Salary: _____

Job duties:

Reason for leaving:

May we contact this employer? Yes No

6. MISCELLANEOUS:

Do you possess a valid driver’s license? Yes No

If Yes: State: _____ Number: _____ Expiration Date: _____

Have you ever been convicted of a criminal or misdemeanor offense? Yes No

If Yes, please explain charges (*omit minor traffic violations*):

Where convicted: _____ Date: _____ Status: _____

Have you ever been terminated or forced to resign from any job? Yes No

If Yes, please explain:

Are you currently under any obligations of a non-compete agreement? Yes No

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

Give the names of two people, not relatives, who are familiar with your recent work:

Name: _____ Phone: _____

Email: _____

Name: _____ Phone: _____

Email: _____

PLEASE CAREFULLY READ THE FOLLOWING STATEMENTS

Authorization to Release Information: By my signature, I consent to the release of information to authorized personnel of The Benefit Company, Inc. which may include but not be limited to information concerning my past and present work, educational records and transcripts, military service, law enforcement records, and/or personnel records. In addition, I authorize The Benefit Company, Inc. to make inquiries of third parties, such as previous employers, credit bureaus, and law enforcement agencies. I further release The Benefit Company, Inc. and all third parties from any and all claims of whatever nature that I may have as a result of any inquiry or response given to such inquiries made in connection with my application for employment and/or continued employment.

Signature: _____ Date: _____

Certification of Applicant: By my signature, I certify, affirm, and agree that all statements on this application, including any resume or other documents submitted by me in connection with my application for employment, are true and accurate. I understand that any misrepresentation, falsification, or material omission of information on this application may result in exclusion from further consideration, or if hired, termination of employment. If I have requested that my present employer not be contacted, I understand an offer of employment will be conditioned upon acceptable information and verification from such employer prior to beginning work.

Signature: _____ Date: _____