

## Benchmark Connector Corp Employment Application

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	ent are equally available to everyone. Please inform nable accommodation for the application or intervier		Date:	
APPLICANT DAT	`A:		Position Applied for:	
Full Name:				
Address:	City:	State:	Zip:	
Phone:	Cell phone/Other Phone:	E-mail Address:		
Date available to start:		Salary Requirements:		
•	quire a work permit can you furnish one?			
Have you ever worked for thi	s company?  Yes No If yes, Wh	en:		
Type of employment desired: Have you ever pleaded "guilty	d States? Yes No If not, are Full-time Part-Ti y", "no contest", or been convicted of a crir	me Temporary me? Yes No	the United States?  Yes No	
applied for will be considered	not constitute an automatic rejection for employment. Dat		f the violation, rehabilitation, and position	
EDUCATION:				
High School:	Address:			
# of years completed:	Did you gradu:	ate? 🗆 Yes 🗆 No		
GPA:	Class Rank:			
College/University:	Address:			
# of years completed:	Did you graduat	e?□Yes□No Degree:		
Major:	GPA:	Class ranl	X	
Other:	Address:			
REFERENCES:				
<u>P</u> lease furnish the nan	nes, addresses, and telephone numbers of two people	to whom you are not related and by	whom you have not been employed:	
Name:		Phone:		
Address:	City		State:	
Name:		Phone:		
Address:	City	:	State:	

## PREVIOUS EMPLOYMENT (begin with most recent position):

Firm: Address:  Phone: Supervisor: Title:
Phone: Supervisor: Title:
Responsibilities:
Starting salary and Title: Ending Salary and title:
Reason for leaving:
May we contact this employer for a reference? □ Yes □ No
Date of Employment: From/ To/ Position(s) Held:
Firm: Address:
Phone: Supervisor: Title:
Responsibilities:
Starting salary and Title: Ending Salary and title:
Reason for leaving:
May we contact this employer for a reference? □ Yes □ No
Date of Employment: From/ To/ Position(s) Held:
Firm: Address:
Phone: Supervisor: Title:
Responsibilities:
Starting salary and Title: Ending Salary and title:
Reason for leaving:
May we contact this employer for a reference? $\Box$ Yes $\Box$ No
SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:
I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employmeducational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or person
from all liability when responding to inquiries tin connection with my application.
In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge
.Signature of Applicant: Date: