



**BENJAMIN**  
enterprises, inc.  
*the hands that help you work*

**192 Tower Drive – Middletown, NY 10941**  
**Tel: 845-692-6243 Fax: 845-692-5906**

## APPLICANT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Home Phone #	Cell Phone #	Email Address	
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
How did you hear about our company? ___Newspaper Ad ___State Employment Agency ___Recruiter ___Our Company Website ___Employee Referral (Name): _____ ___Other (Please Specify): _____			

## EDUCATION

High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

## REFERENCES

*Please list 2 references. (NOT Related to you)*

Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

## PREVIOUS EMPLOYMENT

Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone (    )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/>			

## MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

## DISCLAIMER AND SIGNATURE

<p><b>I certify that my answers are true and complete to the best of my knowledge.</b></p> <p><b>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</b></p>	
Signature	Date

Dear Human Resources Administrator:

In order to maintain our quality of excellence in our employees, Benjamin Enterprises, Inc always obtains a reference prior to hiring our applicants. All information you provide Benjamin Enterprises, Inc., will be held in strict confidence.

Please fax this completed form to Benjamin Enterprises, Inc., at 845-692-5906. Thank you for your time.

**SECTION 1: TO BE COMPLETED BY THE APPLICANT**

(Note: This reference will be checked today. Therefore, please indicate information that can be verified immediately.)

_____ Applicant Name	_____ Social Security Number	_____ Date of Birth
_____ Company Name	_____ Supervisor	_____ Second Supervisor
_____ Company Phone Number	_____ Supervisor's Extension	_____ Company Fax Number
_____ Company Street Address	_____ Company City, State, Zip	_____ Dates of Employment

Job Title / Description: \_\_\_\_\_  
I hereby release, from all liability, the company or person named above and authorizes them to release all information regarding my employment with them.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date of Application

**Applicant - please do not write below this line**

**SECTION 2: TO BE COMPLETED BY EMPLOYER:**

1. If there is a discrepancy with the information provided by the applicant, please make the corrections on the line below.

\_\_\_\_\_  
\_\_\_\_\_

2. Please complete the following information:

	Excellent	Very Good	Good	Average	Poor
Attendance					
Punctuality					
Performance					
Job Knowledge					
Attitude					

Additional Comments: \_\_\_\_\_  
\_\_\_\_\_

3. Is the applicant eligible for rehire?  Yes  No

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
Title: \_\_\_\_\_

Would you like to receive information about Benjamin Enterprises, Inc  Yes  No