



**EMPLOYMENT APPLICATION**

This application is the initial part of the employment process. A personal interview and TALENT Assessment are required before final determination of employment. Benefit Management is an Equal Opportunity Employer. We consider applicants for all positions, regardless of race, gender, religion, color, national origin, age, ancestry, sexual orientation, or disability.

**Please print in ink or type.**

**PERSONAL INFORMATION**

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

Name: \_\_\_\_\_ Social Security Number \_\_\_\_\_

Current address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work phone \_\_\_\_\_ Email address \_\_\_\_\_

In 1994, Congress passed The Violent Crime Control and Law Enforcement Act (“Act”). This Federal law pertains to all companies in the business of insurance, which includes Benefit Management. The Act prohibits certain individuals from working within the insurance industry and imposes what might be considered harsh penalties, particularly for conduct that may have occurred many years ago. Even though an individual may be employable within other industries, he or she may be prohibited from working at Benefit Management because of insurance activities. The Act is clear in that it provides employers no discretion in this matter. Federal law prohibits an individual from engaging in the business of insurance if the individual has been convicted of certain felony crimes, those involving dishonesty or breach of trust. The Act makes it a felony:

- For a prohibited person to begin to work in the business of insurance, or
- To continue to work in the business of insurance,
- For any individual in the business of insurance to willfully permit a prohibited person to be engaged in the business of insurance.

Please note that the Act contains no grandfather clause. Unlike some laws, which do not consider convictions more than 7 years old, the Act considers all convictions, regardless of age.

**Have you ever been indicted or convicted of any such felony**    \_\_\_Yes    \_\_\_No

Have you been arrested for any other crime?    \_\_\_Yes    \_\_\_No

If “yes” give specifics as to charges, date, and outcome. \_\_\_\_\_

Position you are seeking \_\_\_\_\_ Are you currently employed?    \_\_\_Yes    \_\_\_No

May we contact your current employer?    \_\_\_Yes    \_\_\_No    If “no” briefly explain why. \_\_\_\_\_

Have you ever applied to this company before?    \_\_\_Yes    \_\_\_No

If less than 18 years of age, can you provide proof of eligibility to work?    \_\_\_Y    \_\_\_N    \_\_\_Over 18

Do you have a valid driver’s license?    \_\_\_Y    \_\_\_N    License Number \_\_\_\_\_ State \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of VISA or Immigration Status?    \_\_\_Yes    \_\_\_No

Do any of your relatives work here?    \_\_\_Y    \_\_\_N    What is your desired salary range? \_\_\_\_\_

If you were referred to Benefit Management by a current employee, please provide us with the employee’s name. \_\_\_\_\_

**EDUCATION**

	<b>Elementary</b>	<b>High</b>	<b>College/University</b>	<b>Graduate/Professional</b>
School Name				
Years Completed				
Did you Graduate	NOT APPLICABLE	Y    N	Y    N	Y    N
Degree	NOT APPLICABLE			
Course of Study	NOT APPLICABLE			
Describe Specialized Training/Skills				

Continued

Are you proficient on a computer? \_\_\_Y \_\_\_N Please list the computer programs in your proficiency range.

List professional, trade, business or civic activities. \_\_\_\_\_

(You may exclude memberships that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.)

US Military Service \_\_\_\_\_ Rank \_\_\_\_\_

Are you a present member of the National Guard or Reserves? \_\_\_Y \_\_\_N

**FORMER EMPLOYERS** (List below the last three employers, starting with the last one first)

Date Month/Year	Name, Address & Phone number of Employer	Salary	Position	Reason for leaving
<b>From</b>				
<b>To</b>				
<b>From</b>				
<b>To</b>				
<b>From</b>				
<b>To</b>				

Which of these jobs did you like best? \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

**REFERENCES** (Give the names of three references who are not related to you, are not previous employers and you have known for at least one year.)

Name	Address	Business	Years Acquainted

I UNDERSTAND AND AGREE THAT: Providing false information on application or resume can result in termination. Any material misrepresentation or deliberate omission of a fact in my application or interview may be justification for refusal of, or if employed, termination from employment.

It is my understanding that Benefit Management may make a thorough investigation of my entire work history and verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving and receiving of any information requested by Benefit Management, and I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my being hired, or if hired, may subject me to immediate dismissal.

Although Benefit Management makes every effort to accommodate individual preferences, we may at times make the following conditions mandatory; overtime, scheduled lunch hour and breaks and, alternating shift work.

I further understand that this is an application for employment and that no employment contract is being offered. I understand that if I am employed, such employment is at will and that Benefit Management can change wages, benefits and conditions at any time. I have read and understand the above. (Proof of citizenship or immigration status will be required upon employment.)

\_\_\_\_\_  
Signature of Applicant