

EMPLOYMENT APPLICATION FORM
CORPORATE ADMINISTRATOR



INSTRUCTIONS FOR COMPLETION OF APPLICATION FORM

Please complete this application form carefully & to the best of your ability and submit the same for consideration to info@beesmont.bm.

The BeesMont Group of Companies is committed to using the minimum amount of personal information which is necessary to conduct an initial evaluation of an employment candidate and is currently piloting the use of this form for that purpose. To support this endeavour, please do not attach your CV / resume to the email when submitting this completed application form for our consideration.

APPLICANT NAME AND CONTACT INFORMATION

First Name:	Last Name:	Preferred Name:
Contact Email:		
Contact Number:		

EDUCATION

**Statements pertaining to education achieved and degrees obtained will be subject to verification if a conditional offer of employment is extended.*

Course/ Certification/Degree:		Date of Issuance:
Course / Certification/ Degree:		Date of Issuance:
Course / Certification/ Degree:		Date of Issuance:

Other licences, certificates, diplomas, degrees, programs, courses, workshops etc. completed:

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EXPERIENCE

Name of Employer/ Client:	
Title of Engagement/Employment:	
Date of Engagement/Employment:	
Description of Responsibilities:	
Name of Employer/ Client:	
Title of Engagement/Employment:	
Date of Engagement/Employment:	
Description of Responsibilities:	

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Name of Employer/ Client:	
Title of Engagement/Employment:	
Date of Engagement/Employment:	
Description of Responsibilities:	

IMMIGRATION STATUS

**Statements pertaining to Immigration status will be subject to verification if a conditional offer of employment is extended.*

Are you entitled to be in gainful employment in Bermuda without immigration permissions?	Yes
	No

CERTIFICATION

PLEASE READ THE FOLLOWING CAREFULLY

I certify by electronically submitting this form to the BeesMont Group of Companies, and any of their respective entities, that the answers given herein are true and complete to the best of my knowledge.

I understand that evidence of my lawful entitlement to be in gainful employment in Bermuda and my stated education qualifications will be required before the commencement of any gainful employment. I further understand that any deliberately falsified or misleading information communicated in my application, supporting documentation and/or interview(s) will disqualify me from employment and, should such falsifications / misleading information discovered after the commencement of employment will result in my termination of employment for serious misconduct.

By checking this box, I (full name) agree to the above certification statement		Date	
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