

Benzie Senior Resources
Independent Contractor Application

Name: _____ Telephone Number: _____

Business Name: _____ Date of Birth _____

Driver's License # _____ Expiration Date: _____ (Please attach a copy)

Address: _____

Email Address: _____

References: (Please list two that are NOT relatives or BSR employees)

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

I, _____, hereby authorize the Benzie Senior Resources to make a request for my criminal history, for the purpose of evaluating the appropriateness of my position as an Independent Contractor.

Signature: _____ Date: _____

Witness Signature: _____

(A copy of this authorization holds the same force as the original.)

Contractor Skills and/or Interests (Please check all that apply.)

Snow Plowing Lawn Care/Summer Chore House Keeping Other _____

Worker Confidentiality Acknowledgement

I _____ as an Independent Contractor of the Benzie Senior Resources, hereby agree to protect the confidentiality of all clients served by the BSR. I will make every effort to abide by the confidentiality policies of the BSR. I understand that any breach or violation of this agreement will be considered grounds for reprimand and/or dismissal.

Signature: _____ Date: _____

BENZIE SENIOR RESOURCES
BACKGROUND CHECK AUTHORIZATION

I, _____, hereby authorize BENZIE SENIOR RESOURCES, to make a request for my criminal history, for the purpose of evaluating the appropriateness of my employment with BENZIE SENIOR RESOURCES

Maiden and/or Previous Last Names:

Date of Birth: _____

Signature Date

A copy of this authorization holds the same force as the original.