

AGENT APPLICATION
Bennett International Logistics, LLC
McDonough, Georgia 30253

Date: _____

Last Name First Name

Address: _____

City State Zip

Email: _____

Phone: _____ (Home) _____ (Cell)

Location (City, State) applied for: _____

Do you have any Sales experience? YES___ If Yes, provide years of experience NO___

Less than one year _____ 2-5 years _____ 5-10 years _____ 10+years_____

Do you have experience in any of the following? **If so, please explain your knowledge and experience.**

Logistics Planning: _____

Project Logistics: _____

Supply Chain Solutions: _____

Logistics Support: _____

If more space is needed to explain your knowledge and experience please provide on a separate page and include with application.

Do you have any computer experience? YES___ NO___

Do you have a computer in your office? YES___ NO___

Do you have a fax machine in your office? YES___ NO___

If yes, provide FAX# _____

Please FAX your application to David Mudd at 800-688-2221. If you have questions regarding any of the above, please contact David Mudd at 800-866-5500 (Ext. 7351) or Charles Phillips at 800-866-5500 (Ext. 7723)

“The First Choice in Full Spectrum Logistics Planning and Support Solutions”