



## EMPLOYMENT APPLICATION

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

Email: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Were you referred by anyone (Name)? \_\_\_\_\_

Position applying for: \_\_\_\_\_

Temporary part-time work? ( ) Yes or ( ) No

Full-Time work? ( ) Yes or ( ) No

What days are you available to work? Circle all that apply:

Sunday    Monday    Tuesday    Wednesday    Thursday    Friday    Saturday

Can you work evenings? ( ) Yes or ( ) No

If hired, when will you be able to begin working? \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Have you ever applied to work with Missions Baseball before? ( ) Yes or ( ) No

If Yes, please explain, include date: \_\_\_\_\_

If hired, would you have transportation to and from work? ( ) Yes or ( ) No

If hired, would you be able to present evidence of your U.S. Citizenship proof of your legal right to work in the United States? ( ) Yes or ( ) No

If hired, are you willing to submit to and pass a controlled substance test? ( ) Yes or ( ) No



## EMPLOYMENT APPLICATION

Have you ever been convicted of a criminal offense (felony/misdemeanor)? ( ) Yes or ( ) No  
If yes, please state the nature of the crime(s), when and where, convicted and disposition of the case.

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(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense.)

High School Name: \_\_\_\_\_

Did you graduate? ( ) Yes or ( ) No

College/University Name: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Degree/Diploma earned: \_\_\_\_\_

Please list below TWO (2) who have knowledge of your work performance within the last Four (4) years.

Please include professional references ONLY.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_ Years Acquainted: \_\_\_\_\_



## EMPLOYMENT APPLICATION

Are you currently employed? ( ) Yes or ( ) No

May we contact your current/past employer? ( ) Yes or ( ) No

Below, please describe present/past employment positions, dating back to FIVE (5) years. Please account for time unemployed. Even if you have attached a resume, this section must be completed.

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Business Type: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Business Type: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_



## EMPLOYMENT APPLICATION

Please read and INITIAL each paragraph.

\_\_\_\_\_ I certify that I have not purposely withheld any information that might adversely affect my chances for being hired. I attest to the fact that the answers given by me are true and correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure can be grounds for rejection of application or, if I am employed by this company, terms for my immediate expulsion from the company.

\_\_\_\_\_ I understand that if I am employed, my employment is not definite and can be terminated at any time with or without prior notice by either me or the company.

\_\_\_\_\_ I permit the company to examine my references, record of employment, education records and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional expenses with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other people, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way relate to such examination or revelation.

Applicant's

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_