

Idaho Falls Chukars Baseball, LLC



Employment Application

APPLICANT INFORMATION

Last Name	First Name	M.I.	Date
Address		Apartment/Unit #	
City	State	ZIP	
Primary Phone #	E-mail Address		
In case of Emergency Contact:			Primary Phone #
Check up to two (2) Position(s) applying for from the list below: Concessions BBQ Area Attendant Waxie Cleaning Crew Store Tickets Usher			
Dates unavailable to work from June - September			
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you at least 16 years of age?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you at least 19 years of age?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain	

More Information

Leisure Activities			
Can you lift 50 lbs?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Walk a mile?	YES <input type="checkbox"/> NO <input type="checkbox"/>
		Make Change?	YES <input type="checkbox"/> NO <input type="checkbox"/>

REFERENCES

Full Name	Relationship
Company	Phone ()
Email Address	

WHY WOULD YOU LIKE TO WORK FOR THE CHUKARS?

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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EQUAL OPPORTUNITY EMPLOYER

Fill out and save Application Form and email to phenderson@ifchukars.com