

## **EMPLOYMENT APPLICATION**

It is the policy of Ogden Raptors Professional Baseball to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

			Application:	
Last Name:	First:		MI:	
Home Address: Street:				
			Zip:	
Cell Number:	Alteri	nate Phone:		
If under 21, please list age:	E-Mail Addres	ss:		
Position(s) applying for:				
How did you hear about our ope				
Why do you want to work here?				
Have you ever been previously of If yes provide year(s), positions,		? Please list below.		
If yes provide year(s), positions,	and responsibilities?	? Please list below.		
If yes provide year(s), positions,  ADDITIONAL INFORM.	and responsibilities?  ATION	? Please list below.		
If yes provide year(s), positions,  ADDITIONAL INFORM  Are you a U.S. Citizen? Yes	and responsibilities?  ATION  No	? Please list below.		
ADDITIONAL INFORM  Are you a U.S. Citizen? Yes  Do you have any of the following	and responsibilities?  ATION  No g Certificates?			
ADDITIONAL INFORM  Are you a U.S. Citizen? Yes  Do you have any of the followin  Food Handlers Permit?	ATION  No g Certificates?  Yes No	_		
ADDITIONAL INFORM  Are you a U.S. Citizen? Yes  Do you have any of the followin  Food Handlers Permit?  TIPS Certificate?  Majority of our positions	ATION  No g Certificates?  Yes No Yes No require one or both	 _Under 21 of these depending on	n what position you apply for or get tart date? Yes No	
ADDITIONAL INFORM  Are you a U.S. Citizen? Yes  Do you have any of the followin  Food Handlers Permit?  TIPS Certificate?  Majority of our positions	ATION  No g Certificates?  Yes No require one or both ther are you willing to	 _Under 21 of these depending on to have them before st	n what position you apply for or get tart date? Yes No	
ADDITIONAL INFORM  Are you a U.S. Citizen? Yes  Do you have any of the following  Food Handlers Permit?  TIPS Certificate?  Majority of our positions hired for, if you have neither	ATION  No g Certificates?  Yes No require one or both ther are you willing to	 _Under 21 of these depending on to have them before st	n what position you apply for or get tart date? Yes No	

### **REFERENCES** (Not former Employers or Relatives)

Name	Phone Number	Years Known

#### **EMPLOYMENT BACKGROUND** (List your present or last position first)

From	То	Company	Position	Reason for Leaving

#### IMPORTANT - READ BEFORE SIGNING

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences immediate termination.

I authorize Ogden Raptors Professional Baseball to contact former employers regarding my employment. I authorize my former employers to communicate information fully and freely regarding my previous employment, attendance, and attitude. I authorize those persons designated as references to communicate information fully and freely regarding my previous employment. I also understand that any oral or written statements to the contrary are expressly disavowed and should not be relied upon by any prospective or existing employee. I understand that the use of illegal drugs is prohibited during employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs during employment.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Ogden Raptors Professional Baseball, except in a specific written contract of employment signed on behalf of the organization by its, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ	THE ABOVE CERTIFICATION AND I UND	DERSTAND AND AGREE TO ITS TERMS.
Signed	Date	<u>)                                    </u>

Applicants Name:	
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# **AVAILABILITY for 2021 SCHEDULE**

DATE	DAY	YES	NO	DATE	DAY	YES	NO
May 22 <sup>n</sup>	Saturday			July 17	Saturday		
May 23	Sunday			July 18	Sunday		
May 24	Monday			July 19	Monday		
June 2	Wednesday			July 28	Wednesday		
June 3	Thursday			July 29	Thursday		
June 4	Friday			July 30	Friday		
June 5	Saturday			July 31	Saturday		
June 6	Sunday			August 1	Sunday		
June 7	Monday			August 2	Monday		
June 16	Wednesday			August 11	Wednesday		
June 17	Thursday			August 12	Thursday		
June 18	Friday			August 13	Friday		
June 19	Saturday			August 14	Saturday		
June 20	Sunday			August 15	Sunday		
June 21	Monday			August 16	Monday		
June 30	Wednesday			August 25	Wednesday		
July 1	Thursday			August 26	Thursday		
July 2	Friday			August 27	Friday		
				August 28	Saturday		
July 7	Wednesday			August 29	Sunday		
July 8	Thursday			August 30	Monday		
July 9	Friday						
July 10	Saturday			September 8	Wednesday		
July 11	Sunday			September 9	Thursday		
July 12	Monday			September 10	Friday		