



**APPLICATION
FOR SEASONAL EMPLOYMENT**
 FirstEnergy Park, 2 Stadium Way, Lakewood, NJ 08701
 Office: (732)901-7000 Fax: (732)901-3967
 www.blueclaws.com
 The Jersey Shore BlueClaws are an Equal Opportunity Employer

Today's Date: _____

Personal:

Last Name: _____ First Name: _____ Middle Initial: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Other Phone: _____

Social Security #: _____ E-Mail Address _____

Position Desired:

(The BlueClaws are only hiring for Food & Beverage positions at this time.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Usher | <input type="checkbox"/> Merchandise | <input type="checkbox"/> Customer Service Representative |
| <input type="checkbox"/> Parking Attendant | <input type="checkbox"/> Grounds Crew | <input type="checkbox"/> Security |
| <input type="checkbox"/> Tickets | <input type="checkbox"/> Game Day Receptionist | <input type="checkbox"/> Custodial |
| <input type="checkbox"/> Production Crew | <input type="checkbox"/> Mascot | <input type="checkbox"/> Bat Boy |
| <input checked="" type="checkbox"/> Concessions | <input type="checkbox"/> Clubhouse Manager | <input type="checkbox"/> Other _____ |

General Information:

Are you 18 years or older? YES NO

Are you a citizen of the United States? YES NO, If NO, do you have authorization to work? YES NO

Will this position be your primary job or will it be your second job? PRIMARY SECOND JOB

If your SECOND JOB, what is your primary job? _____ Hours worked per week _____

When will you be available to start work?

What days can you work? M Tu W Th F Sa Su Any Day

Can you work nights? YES NO

Do you have appropriate means of transportation? YES NO

What hourly pay rate are you looking for? \$ _____ per hour

Highest Level of Education:

High School/College/Technical School: _____ City/State: _____

Major/Study: _____ Did you graduate? YES NO

Employment History: (list your current or most recent employer first)

Employer: _____ Dates: _____ to _____
Address: _____ Salary: \$ _____
Job Title: _____ Reason for leaving: _____
Supervisor: _____ Phone: _____
Briefly describe your job duties: _____

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Address: _____ Salary: \$ _____
Job Title: _____ Reason for leaving: _____
Supervisor: _____ Phone: _____
Briefly describe your job duties: _____

Give any other information you believe would assist us in considering you for employment:

References:

Give below the names of three persons not related to you that you have known at least one year:

Name	Address	Phone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Certification:

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, and misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the Company's policies and rules found in any employee handbook, policy manual, or other communications, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the Company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the Company. I understand that no Company representative, other than its President, and then only when in writing and signed by the President, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

I HAVE READ THE ABOVE STATEMENTS:

Applicant's Signature: _____ Date: _____