



Job Application

Equal Opportunity Employer

Personal Information

First Name	Last Name	Social Security Number
		- - -
Present Address		
City	State	Zip Code
Phone Number	Email Address	
Gender	Date of Birth	
	/	/

Employment Desired

Position(s) of Interest	Date You Can Start	
Are you currently employed?	Yes	No
If yes, may we inquire of your present employer?	Yes	No
Have you ever applied for employment with the SWB RailRiders?	Yes	No
Were you hired by the SWB RailRiders?	Yes	No

Education

High School	Location	Years Attended	Did you graduate?
College	Location	Years Attended	Did you graduate?

Employment History (Please list your last three employers, starting with your most current)

Month & Year	Name & Address of Employer	Position	Reason for Leaving
1			
2			
3			

How did you hear about employment with the Scranton/Wilkes-Barre RailRiders? Check all that apply.

Radio Television Newspaper Social Media Website Friend Other

(Continue on other side)

References (Please list the names of at least two individuals not related to you, whom you have known at least one year)

Name	Address	Phone	Years Known
1			
2			
3			

Special Skills

Do you have any other experience, training, qualifications or skills (foreign languages), which you feel make you especially suited for work at the Scranton/Wilkes-Barre RailRiders?

Professional society memberships, extracurricular activities:

Have you ever been convicted of a felony (excluding any sealed or expunged convictions)? Yes No (NOTE: No applicant will be denied employment solely on the grounds of a conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

If yes, please explain:

Can you perform the essential duties of the job in which you wish to be employed, with or without accommodation?

With Accommodation Without Accommodation

Authorization

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL."

"I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION."

"I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AUTHORIZED COMPANY REPRESENTATIVE."

Signature

Date

OFFICE USE ONLY

POSITION	HOME DEPARTMENT	PROJECT	HIRE DATE
HOURLY PAY RATE 1	HOURLY PAY RATE 2	HOURLY PAY RATE 3	

Pay Frequency = Semi-Monthly

ACA Initial Status = Variable Hour

Safe Harbor Code = Federal Poverty Level

*I certify that I have hired the above-named employee on this date and input the information correctly into Paycom.

Hiring Manager Signature

Date