

For Office Use Only:
Date Rcvd
SS#
Action

Akron Baseball LLC Employment Application

Full Name		Date		
Street Address				
City	State	Z	ip Code	
Daytime Phone		Email Address _		
Age: Under 18? Yes No		How were you referred to the company?		
Desired Wage/Salary		_ Preferred Schedu	le — FT PT Seasonal	
If an offer of employm States? Yes	nent is extended, are you able t	to provide proof of your au	thorization to work in the United	
Desired Position(s) (in	order of preference)			
1	2		3	
	E	DUCATION		
	School Name & Location (City & State)	Major	Degree Received/Date	
High School				
Trade/Technical		-		
		- - <u></u>		
Jniversity/College				
University/College Graduate				
		- - - - -		
Graduate		OTHER and certifications held. Prov	vide expiration or expected completion da	

EMPLOYMENT HISTORY

Please give a complete record of past employment.

Company:			Phone:
Address:			Companyia
Job Title:	Starting S	alary: <u>\$</u>	Ending Salary:
Responsibilit	ies:		
From:	To:	Reason for Leaving	g:
May we cont	act your previous employer for a reference?	Yes No	If No, please explain
Company:			Phone:
Address:			Supervisor:
Job Title:	Starting S	alary: <u>\$</u>	Ending Salary:\$
Responsibilit	ies:		
From:	To:	Reason for Leavin	g:
May we cont	act your previous employer for a reference?	Yes No	If No, please explain
Company:			Phone:
Address:			Supervisor:
Job Title:	Starting S	alary: <u>\$</u>	Ending Salary:\$
Responsibilit	ies:		
From:	To:	Reason for Leavin	g:
May we cont	act your previous employer for a reference?	Yes No	If No, please explain

EMPLOYMENT HISTORY

Please give a complete record of past employment.

Address:	Starting S		Phone: Supervisor: Ending Salary:\$	
Responsibilities:				
From:	To:	Reason for Leaving	g:	_
May we contact you	ur previous employer for a reference?	Yes No	If No, please explain	
			Phone: Supervisor:	
Job Title:	Starting S	alary: <u>\$</u>	Ending Salary:\$	
Responsibilities:				
From:	To:	Reason for Leaving	g:	
May we contact you	ur previous employer for a reference?	Yes No	If No, please explain	
Company: Address:			Phone: Supervisor:	
	Starting S	alary: <u>\$</u>	Ending Salary:	
Responsibilities:				
	To:		g:	
	ur previous employer for a reference?	Yes No		

PROFESSIONAL REFERENCES

Please list former supervisors that we may contact for a professional reference.

Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
	MISCELLANEOUS
	ent but will be considered in relation to specific position requirements.)
Is yes, describe fully including the nature of	the offense, date and type of court
CERT	IFICATION & AGREEMENT
•	is application is true and correct to the best of my knowledge. I understand terially incorrect information in this application is grounds for immediate Akron RubberDucks (the "Company").
understand that any offer of employment Company review of my background check throughout the year. I hereby agree to drug	nd checks are required and will be performed for all positions. I is contingent upon my passing the required drug test and upon the ks. I also understand that my position may be subject to drug testing testing and background checks as required by Akron Baseball LLC and g from such screening and/or decisions made based on such screening.
	pany is "at will" and is not guaranteed for any particular length of time and inate the relationship at any time without prior notice.
individuals or organizations having knowled	former employer(s), educational institution(s), reference(s) and any other lige about me to furnish Akron Baseball LLC and/or its agents with all release from liability any and all persons or organizations providing this liates and its agents.
Signature of Applicant	Date