



## Application For Employment

### PERSONAL INFORMATION

**NAME**

Last : \_\_\_\_\_, First : \_\_\_\_\_, M.I. : \_\_\_\_\_

SOCIAL SEC. I.D.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

BIRTH DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

**PRESENT ADDRESS\***

Street: \_\_\_\_\_

Cty, ST, Zip: \_\_\_\_\_

**PERMANENT ADDRESS\***

Street: \_\_\_\_\_

Cty, St, Zip \_\_\_\_\_

**SCHOOL ADDRESS\*** (If applicable)

Street \_\_\_\_\_

Cty, St, Zip \_\_\_\_\_

MANAGERS NOTES

\*Please indicate which address you would like mail to be sent to during off-season.

**PHONE**

Home: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

### POSITION DESIRED

Position: \_\_\_\_\_ Start Date: \_\_\_\_\_ Salary Req: \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ Where? \_\_\_\_\_

May we inquire of your present employer? \_\_\_\_\_

Are there any restrictions to your work scheduling availability? \_\_\_\_\_

If So, please list. \_\_\_\_\_

Please List Two Industry-Specific References / Experience Below:

Date	Name of Employer	Position	Salary	Reason For Leaving

**EDUCATION\***

Level	Name and Location Of School	No. of Years	Did you Graduate?	Subjects Studied**
High School				
College				
Trade School				

\*The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

\*\*List any subjects that you feel will enhance your ability to perform the position for which you are applying.

**FORMER EMPLOYERS**

List below the last four employers, starting with the last one first:

DATE (mo, yr)	Name and Location of Employer	Salary	Position	Reason For Leaving
FROM: TO:				
FROM: TO:				
FROM: TO:				
FROM: TO:				

**REFERENCES**

Give the names of three persons not related to you, whom you have known for at least 1 yr.

Name	Address	Business	Yrs

**PHYSICAL RECORD**

Do you have any physical limitations that preclude you from performing any work for which you are being considered?  yes  no

If yes, what can we do to accommodate your limitation? \_\_\_\_\_

In case of emergency, notify: \_\_\_\_\_

Name

Address

Phone #

•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 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 ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

•I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE

DATE: / /

SIGNATURE: \_\_\_\_\_