LYNCHBURG BASEBALL CORP.
CAROLINA LEAGUE CLASS
"A" ADVANCED AFFILIATE
OF THE CLEVELAND INDIANS

LYNCHBURG HILLCATS

3180 FORT AVE.
LYNCHBURG, VA 24501
CALVIN FALWELL FIELD AT
LYNCHBURG CITY STADIUM

Application for Employment

Name: _____
First **Middle** **Last**

Mailing Address: _____
City, State, Zip Code

Phone: (_____) _____ **Email:** _____

SSN: _____ **Are you over the age of 16? Yes No**
If no, are you over the age of 15? Yes No

Education (Check Highest Level Completed)

_____ Grade School
_____ High School Diploma or Equivalent
_____ College (2 years)
_____ College Graduate

Name of current school: _____

Previous Work Experience

Employer: _____
Supervisor: _____
Phone Number: _____ **Employed from:** _____**to** _____
Reason for Leaving: _____

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Supervisor: _____
Phone Number: _____ **Employed from:** _____**to** _____
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References

Name:_____ **Relationship:**_____ **Phone:**_____
Name:_____ **Relationship:**_____ **Phone:**_____
Name:_____ **Relationship:**_____ **Phone:**_____

Position(s) Applying for: _____

Signature: _____ **Date:** _____