

**2018 Midland RockHounds / Sockers FC / Timeout Sports
Employment Application**

Personal Information

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Social Security Number _____ Email: _____

Medical Issues: _____

Employment Desired

Choose **five** positions that interest you and rank them according to your order of preference (1-5)

- | | | |
|------------------------------|-----------------------|---------------------------|
| ___ Beer Sales (Must be 18) | ___ Camera/Scoreboard | ___ Ticket Sales |
| ___ Beer Vendor (Must be 18) | ___ Batboy/Batgirl | ___ Ticket Taker |
| ___ Concession Stand | ___ Mr./Mrs. Clean | ___ Usher/Usherette |
| ___ Concourse Games | ___ Picnic Area | ___ Waiter/Waitress |
| ___ Customer Service | ___ Program Sales | ___ Clean-Up Crew |
| ___ Food & Soda Vendor | ___ Souvenirs | ___ Other |
| ___ Groundskeeping | ___ Souvenir Vending | ___ Suite
housekeeping |

Availability

Can you begin work on April 1st ? ___ Yes ___ No
If no, when? _____

Can you work weekends, week days, or both? _____

Once you begin work, can you work for the entire regular season (possibly through mid-Sept.)?
___ Yes ___ No If no, what day can you work until? _____

Have you worked for the Midland RockHounds/Concessions before? ___ Yes ___ No

If yes, when and in what capacity? _____

Education

What is the highest level of education you have completed? Please check only one.

- Did not attend High School
- Attended College
- Attended High School
- Currently attending College
- Currently attending High School
- College Graduate
- High School Graduate
- Other _____

Current Employer

Are you currently employed? Yes No

If yes, company name? _____ Address _____
Position _____ Supervisor _____ Phone _____

Former Employers

Please list your last three employers, beginning with the most current.

<u>Month & Year</u>	<u>Name/Address of Employer</u>	<u>Position</u>	<u>Supervisor</u>	<u>Reason for Leaving</u>
From: To:				
From: To:				
From: To:				

References

Please list the names of 3 persons not related to you, whom you have known for at least one year.

<u>Name</u>	<u>Phone</u>	<u>Relationship</u>

Emergency Contacts

#1 Contact: Name _____

Address _____

City _____ State _____ Zip Code _____

Day Phone _____ Evening Phone _____ Relationship _____

#2 Contact: Name _____

Address _____

City _____ State _____ Zip Code _____

Day Phone _____ Evening Phone _____ Relationship _____

Authorization

Have you ever been convicted of a felony? ___ Yes ___ No

If yes, when?

If yes, nature of offense? _____

(Note: Conviction is not an automatic bar to employment. Circumstances will be considered, including the nature of the crime and length of time since conviction.)

This application does not create any express or implied contract of employment or promise of continued employment or other legal obligation by the Midland RockHounds. I authorize investigation of all statements contained in this application. By signing this application, I authorize the RockHounds to perform a background check. I understand that any misrepresentation of facts called for is cause for immediate dismissal.

Date _____ Signature _____

IF EMPLOYED, YOU MUST FURNISH THE ROCKHOUNDS WITH SIGNED W-4 AND I-9 FORMS AND TWO FORMS OF IDENTIFICATION BEFORE RECEIVING A PAYCHECK.

For Office Use

Comments _____

