

APPLICATION FOR SEASONAL EMPLOYMENT

Mailing Address: York Revolution, 5 Brooks Robinson Way, York, PA 17401

Pre-Employment Questionnaire

An Equal Opportunity Employer

PERSONAL INFORMATION

Date: _____

Name: _____
 Last First Middle

Social Security Number: _____

Present Address: _____
 Street City State Zip County

Permanent Address: _____
 Street City State Zip County

Phone: () _____

Are you 18 years or older? Yes No
 Are you eligible to work in the United States? Yes No

Email address: _____

Drivers Lic #: _____

IMPORTANT

All applicants tentatively selected for employment in part-time positions may be required to submit to a background check and drug screening.

This application will become a permanent part of your personnel record. This application is active 90 days from date of completion. Please answer each question accurately and completely.

Employment in this Company is at-will. Either employee or employer may terminate the employment without notice for any reason or no reason.

EMPLOYMENT DESIRED

Position: _____

Date You Can Start: _____

Salary Desired: _____

Are you employed now? Yes No

If so, may we inquire of your employer? Yes No

How were you referred to this Company?

Newspaper Friend Agency

FOR HUMAN RESOURCES' USE ONLY

Department: _____

Job Title: _____

Starting Date: _____

Worked 480+ hours last season: Yes No

Pay Rate: \$ _____

Safety Sensitive Position: Yes No

Have you ever been employed by York Professional Baseball, any of its subsidiaries or affiliates before? Yes No

If so, Where? _____ When? _____

Do you have any relatives that work for the Company? Yes No Where? _____

FORMER EMPLOYERS (List below last four employers, starting with most recent.)

Date Month/Year	Name/Address/Telephone Of Former Employer	Salary	Position	Supervisor	Reason for Leaving
From: _____		Per Year			
To: _____					
From: _____		Per Year			
To: _____					
From: _____		Per Year			
To: _____					
From: _____		Per Year			
To: _____					

GENERAL

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

Please describe: _____

AVAILABILITY – To help us consider you for a job that matches your availability, please indicate all days and hours your normal working hours can include. *You must answer all questions to be considered for employment.*

I am applying for: Full-time Part-time Seasonal

Are you available to work on a regular basis:

Weekdays (Monday – Friday) Yes No

Memorial Day through Labor Day? Yes No

Saturday Yes No

Weekends before Memorial Day? Yes No

Sunday Yes No

Weekdays before Memorial Day? Yes No

Day Hours Yes No

Weekends after Labor Day? Yes No

Evening / Night Hours Yes No

Weekdays after Labor Day? Yes No

Holidays Yes No

EDUCATION

Name / Location of School	Years Attended	Graduated		Major / Course
High School		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
College		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Trade, Business, Correspondence School		<input type="checkbox"/> Yes	<input type="checkbox"/> No	

REFERENCES Give the names of *three business references*. If no previous employment, give the names of three personal references not related to you.

	Name	Address	Business	Phone	Years Acquainted
1.					
2.					
3.					

In case of emergency, York Revolution may notify:

Name	Address	Day Phone	Evening Phone
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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 any 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 that this is not a contract for employment. 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.

Signature _____ Date _____