

**AFFTON ATHLETIC ASSOCIATION
APPLICATION FOR EMPLOYMENT**

PRINT LEGIBLLY

Date: _____

Job Appling For: _____

If Umpire, how many years' experience? At AAA: _____ Other: _____

Name: _____
Last First MI

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Cell Phone (____) _____

Email Address: _____

Date of Birth: _____ / _____ / _____

Please attach a copy of your birth certificate or copy of driver's license.

Social Security Number: _____ - _____ - _____

Driver's License # _____ (If different than SS#)

Contact in case of emergency:

Name: _____ Phone: _____

Name: _____ Phone: _____

Do you have any allergies? YES NO
If yes please describe on back of application.

Are you on any medications? YES NO
If yes please list on back of application.

Signature of Applicant: _____

Please list previous employment:

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Supervisor: _____

Start Date: _____ End Date: _____ Rate of Pay: _____

Reason for Leaving: _____

Employer: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Supervisor: _____

Start Date: _____ End Date: _____ Rate of Pay: _____

Reason for Leaving: _____

PLEASE LIST THREE (3) REFERENCES ON BACK

LIST 2 WORK REFERENCES

NAME: _____ COMPANY _____

ADDRESS: _____

CITY: _____ STATE; _____ ZIP: _____

PHONE: (_____) _____

EMAIL: _____

NAME: _____ COMPANY _____

ADDRESS: _____

CITY: _____ STATE; _____ ZIP: _____

PHONE: (_____) _____

EMAIL: _____

1 PERSONAL

NAME: _____ COMPANY _____

ADDRESS: _____

CITY: _____ STATE; _____ ZIP: _____

PHONE: (_____) _____

EMAIL: _____