



Cooperstown Baseball World

Application for employment

Today's Date: _____

Personal Information

Name:

Last First Middle

Social Security #:

_____ Birthdate: _____

Desired Position(s):

Present Address:

City State Postal Code

Phone Number:

_____ E-mail: _____

Permanent Address:

City State Postal Code

Phone Number:

_____ E-mail: _____

Education

High School:

Name Location Graduated year/ Degree

College:

Name Location Graduated year/Degree

Other:

Name Location Graduated year/ Degree

Employment

Please describe your most recent employment.

Company:

_____ Dates: _____ To _____

Address:

City State Postal Code

Phone Number:

_____ Fax: _____

Job Title(s):

Supervisor:

_____ Phone Number _____

Cooperstown Baseball World
Application for employment

Cooperstown Baseball World
Application for employment

Employment

Company: _____ Dates: _____ to _____

Address: _____

City State Postal Code

Phone Number: _____ Fax: _____

Job Title(s): _____

Supervisor: _____ Phone Number _____

Employment

Please list other positions you have held in the past.

Company Location Dates Title

Company Location Dates Title

Other: Describe any other certifications, activities, or interests.
(e.g., First Aid, Lifeguard certification, sports, clubs)

Cooperstown Baseball World is an organization that hosts week long baseball tournaments for boys whose ages range from 11 to 16-years of age. It is also considered an overnight children's camp. Please explain any of your qualities or experiences that make you a good candidate for employment under Cooperstown Baseball World (e.g., camp or counselor experience, working with children, leadership in a group, sports participation).

Cooperstown Baseball World
Application for employment

References

Please provide us with a list of individuals who have known you for at least one year, who are able to accurately describe your character, experience, and ability. These individuals should not be related to you, and will be contacted by our office.

Name	Relation	Phone number
------	----------	--------------

Name	Relation	Phone number
------	----------	--------------

Name	Relation	Phone number
------	----------	--------------

I authorize investigation of all statements herein and release Cooperstown Baseball World and all others from liability in investigation.

Signature: _____ Date: _____