



# Balls-n-Strikes Gametime Sports

4160 Ehlmann Road  
St. Peters, MO 63376  
(636) 477-3200  
www.bnsgametime.com

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zipcode: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Position Applied For: \_\_\_\_\_ Date Available to Start: \_\_\_\_\_  
Desired Hourly Wage: \_\_\_\_\_ Have you ever worked for this company? Yes No  
Are you a citizen of the United States of America? If no, are you authorized to work in the U.S?  
 Yes  No  Yes  No  N/A

### Education

High School: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_  
Location: \_\_\_\_\_ Did you graduate? Yes No  
College: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_  
Location: \_\_\_\_\_ Did you graduate? Yes No  
Degree: \_\_\_\_\_ Activities: \_\_\_\_\_  
Other: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_  
Location: \_\_\_\_\_ Did you graduate? Yes No  
Degree: \_\_\_\_\_ Activities: \_\_\_\_\_

### References

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employment History

Please list most recent position first.

Company: \_\_\_\_\_ Position: \_\_\_\_\_
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_
Phone: \_\_\_\_\_
Duties: \_\_\_\_\_

May we contact this employer? Yes No

Company: \_\_\_\_\_ Position: \_\_\_\_\_
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_
Phone: \_\_\_\_\_
Duties: \_\_\_\_\_

May we contact this employer? Yes No

Company: \_\_\_\_\_ Position: \_\_\_\_\_
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_
Phone: \_\_\_\_\_
Duties: \_\_\_\_\_

May we contact this employer? Yes No

Statement

By signing below, you attest to the accuracy of the information provided on this employment application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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