

## **Equal Opportunity Employer**

THIS STATION IS AN EQUAL OPPORTUNITY EMPLOYER. THIS STATION SEEKS AND EMPLOYS QUALIFIED PERSONS IN ALL JOB CLASSIFICATIONS AND POSITIONS WITHOUT DISCRIMINATION ON THE BASIS OF RACE, RELIGION, SEX, NATIONAL ORGIN, AGE OR DISABLITY. SUCH DISCRIMINATORY PRACTICES ARE SPECIFICALLY PROHIBITED BY LAW. IF YOU BELIEVE YOUR EQUAL EMPLOYMENT RIGHTS HAVE BEEN VOILATED, YOU MAY CONTACT THE FEDERAL COMMUNICATIONS COMMISSION, THE EQUAL EMPLOYMENT OPPORTUNITY COMMISSION OR THE APPROPRIATE STATE OR LOCAL EED AGENCY.

## **APPLICATION FOR EMPLOYMENT**

PERSONAL INFORMA	TION							
Name								
Address								
City, State, Zip								
Social Security #		-	-					
Home Phone # (including area code)	(	)	-					
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.	YES	NO	HAVE YOU EVER BEEN CONVICTED OF A FELONY?	YES	NO	ARE YOU CURRENTLY BOUND BY A NON- COMPETE AGREEMENT?	YES	NO

EMPLOYMENT DESIRED					
Work Code:	Full Time,		Part Time,		Temporary
Position Applying for:			Date you can Start	Salary Desired	
Are you currently employed?	Yes	No	If yes, may we inquire of your present employer?	Yes	No
Ever applied to this company before?	Yes	No	Where	When	

EDUCATION	
College (Name & Location)	
Degree & Major	
Technical\Trade School (Name & Location)	
Degree\certification Received & Course of Study)	
High school (Name & Location)	
Special Training	

IMPORTANT: If currently employed, may we contact your present employer?   Yes  No					
FORMER EMPLOYERS (List below last three employers, starting with last one first).					
Dates of Employment	Name, Address, and Telephone Number	Salary	Position	Reason for Leaving	
From					
То		\$			
From					
То		\$			
From					
То		\$			

## APPLICATION FOR EMPLOYMENT

(Continued)

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

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, green card, etc.) with three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

"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 my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that my result from utilization of such information. I understand that misrepresentation; omission of facts or qualifications is cause for dismissal.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contract to the foregoing, unless it is in writing and signed by an authorized company representative. Further, I understand and agree that 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 previous notice.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Applicant Signature

Date

-----DO NOT WRITE BELOW THIS LINE------

INTERVIEWED BY	DATE
	Hired Date
	Company
	Position
	Salary

REMARKS