

ROCKFLEET BROADCASTING, INC.

An Equal Opportunity Employer

Application For Employment

Personal Print all information clearly, accurately, and completely.

Last name First name Middle initial

Present address (street, city, state, zip code) Phone #

Last previous address within United States (if changed within the last 5 years)

Are you 18 years of age or older? Yes ___ No ___

Have you been convicted of a crime? Yes ___ No ___ If yes, please explain fully.

This information will not necessarily bar an applicant from employment.

Present Telephone Number:

Position applying for

Full time ___ Part time ___ Summer ___ Salary desired _____ Date you can start _____

How did you hear about position? Industry referral ___ Newspaper ad ___ Walk-in ___

School placement office ___ Please specify _____

Employment office ___ Please specify _____

Other source ___ Please specify _____

Employment History

Begin with the most recent position.

From Mo/Yr _____ Salary _____ To Mo/Yr _____ Salary _____
Name & address of employeer _____

From Mo/Yr _____ Salary _____ To Mo/Yr _____ Salary _____
Name & address of employeer _____

From Mo/Yr _____ Salary _____ To Mo/Yr _____ Salary _____
Name & address of employeer _____

From Mo/Yr _____ Salary _____ To Mo/Yr _____ Salary _____
Name & address of employeer _____

Account for all unemployed time since leaving school, and between positions held, during the last 10 years.

From Mo/Yr _____ What were you doing? _____

From Mo/Yr _____ What were you doing? _____

From Mo/Yr _____ What were you doing? _____

Education

Type of school	Name and location	Courses of study	Graduate	Degree awarded
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High School		Commercial, academic, etc.	Yes ___ No ___	
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Technical School or two year degree			Yes ___ No ___	
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College		Major	Yes ___ No ___	
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Graduate school		Major	Yes ___ No ___	
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Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my Application of interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

INTERVIEWEE PROFILE DATA FORM

We request this information in order to meet EEO requirements of the Federal Communications Commission. **It will be maintained in a file separate from your application and will not be considered in connection with your application.** Please complete and check items applicable to you.

- A. Name: _____ Date: _____
- B. Vacancy applied for (Job Title): _____
- C. Date you submitted application or resume: _____
- D. Male _____ Female _____
- E. White, not of Hispanic Origin - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black, not of Hispanic Origin - A person having origins in any of the black racial groups of Africa.
- Hispanic - A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture of origin, regardless of race.
- Asian or Pacific Islander - A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.
- American Indian or Alaskan Native - A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
- F. What prompted you to apply? (Please check the primary reason only.)
- | | | |
|---|--|---------------------------------|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Employee Referral | <input type="checkbox"/> School |
| <input type="checkbox"/> Agency | <input type="checkbox"/> Non-Employee Referral | <input type="checkbox"/> Self |
| <input type="checkbox"/> Community Organization | <input type="checkbox"/> Other _____ | |

G. Please identify the referral source by name, and provide any additional contact information you know about that source or that is applicable to your situation, including address, phone, e-mail, and contact person:

H. City, state and zip code of your home address:

[For station use only]

Referral Source Entitled To
Notification Upon Request? Yes [] No []

Interviewee hired? Yes [] No []

If yes, date accepted: _____