



# KTTC/KXLT Television

## EMPLOYMENT APPLICATION

**INSTRUCTIONS TO APPLICANT:** Please answer all questions and sign. You must fully and accurately complete this employment application. Incomplete applications will not be considered. When completing, do not identify race, color, gender, age, national origin, citizenship, religion or provide any extraneous information.

Applications are considered active only for 30 days. Submission/receipt of an application does not mean that the company currently has a job position available.

The company will consider all applicants without discrimination on any basis prohibited by law and is an equal employment opportunity employer.

### **1. PERSONAL INFORMATION**

Name: \_\_\_\_\_  
Last
First
Middle Initial

Address: \_\_\_\_\_  
 \_\_\_\_\_  
Street
City
State
Zip

Phone: \_\_\_\_\_

Please provide your most recent previous address:

\_\_\_\_\_

Street
City
State
Zip

**If you are hired, you must supply proof of your age.**

Have you ever worked for the company before? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

If yes, reason for leaving: \_\_\_\_\_  
 \_\_\_\_\_

Name of last supervisor at the company: \_\_\_\_\_

Have you ever applied for work with the company before? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

**2. KIND OF WORK DESIRED**

What kind of work are you seeking? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date you can begin work: \_\_\_\_\_

How were you referred to the Company? \_\_\_\_\_ Employment Agency \_\_\_\_\_ Friend  
\_\_\_\_\_ Walked In \_\_\_\_\_ Newspaper Advertisement \_\_\_\_\_ State Employment Office  
\_\_\_\_\_ Other

Certain Jobs may require working overtime and on weekends.  
Are you available for such hours of work? \_\_\_\_\_ Yes \_\_\_\_\_ No  
(Answering "No" to this question does not mean you will be ineligible for employment)

**3. EMPLOYMENT HISTORY**

**Last Employer**

Company Name: \_\_\_\_\_

Address:

\_\_\_\_\_  
Street City State Zip

Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving or desiring change: \_\_\_\_\_  
\_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Describe duties and responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Previous Employer**

Company Name: \_\_\_\_\_

Address:

\_\_\_\_\_  
Street City State Zip

Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_

Dates Employed: \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving or desiring change: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Describe duties and responsibilities: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**4. Education**

High School: \_\_\_\_\_

Name

City

State

Did you graduate? Yes \_\_\_\_\_ No \_\_\_\_\_

Other schools attended:

\_\_\_\_\_

Name

City

State

Dates of attendance \_\_\_\_\_ to \_\_\_\_\_

Did you receive a degree? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

Area of study/type of degree? \_\_\_\_\_

Other schools attended:

\_\_\_\_\_

Name

City

State

Dates of attendance \_\_\_\_\_ to \_\_\_\_\_

Did you receive a degree? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

Area of study/type of degree? \_\_\_\_\_

**5. OTHER BACKGROUND**

During any period of employment with the company, will you work for another employer or do you intend to seek additional work elsewhere? Yes \_\_\_\_\_ No \_\_\_\_\_

Please describe below the three most important things to you about the place you work.

1: \_\_\_\_\_

\_\_\_\_\_

2: \_\_\_\_\_

\_\_\_\_\_

3: \_\_\_\_\_  
\_\_\_\_\_

**6. REFERENCES**

Identify three persons not related to you that you have known for at least one year.

_____ Name	_____ Address/Phone	_____ Years
_____ Name	_____ Address/Phone	_____ Years
_____ Name	_____ Address/Phone	_____ Years

**READ BEFORE SIGNING**

I certify that the information on this application is complete, true and correct to the best of my knowledge. I understand that omission or misrepresentation of facts may be grounds for rejection of this application or for dismissal from employment as subsequently discovered.

I authorize investigation of all statements contained herein and of the references listed above to give you any and all pertinent information, personal or otherwise. I release all parties from liability or any damage that may result from furnishing the same to you.

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