

NEW TEAM MEMBER APPLICATION



DATE:

NAME (LAST NAME FIRST)			
PRESENT ADDRESS	CITY	STATE	ZIP
PERMANENT ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP
PHONE NO.	EMAIL ADDRESS	REFERRED BY	

OPPORTUNITY SOUGHT

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED? YES NO	IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO	
HAVE YOU APPLIED WITH US BEFORE? YES NO	WHERE?	WHEN?



You will notice that the word "job" is not used anywhere on this application (other than in this paragraph). We are not looking for people that are looking to be employees at a job working for a manager. We are looking for self motivated leaders ready to take ownership of this company. If you are looking for a job, please discard this application.

EDUCATION HISTORY

	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?
GRAMMAR SCHOOL			
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR OTHER SCHOOL			

FORMER EMPLOYERS

MONTH & YEAR	NAME & LOCATION OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

REFERENCES

PLEASE PROVIDE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST A YEAR.

NAME	PHONE NUMBER(S)	HOW YOU KNOW THIS PERSON

MORE ABOUT YOU

WHAT DO YOU DO FOR FUN?
ARE YOU FAMILIAR WITH THE RADIO STATION?
WHY ARE YOU APPLYING WITH THIS COMPANY?

Don't forget to sign and return the Application Filing Agreement along with this Application.

APPLICATION FILING AGREEMENT

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the Company if I have been hired. Furthermore, I understand that just as I am free to resign at any time, the Company reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Company has the authority to make any assurances to the contrary.

I give the Company the right to investigate all references, conduct a credit check, background check and to secure additional information about me, if job related. I hereby release from liability the Company and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Company may conduct a drug screening prior to employment and if hired, during employment, under the following circumstances: when there is reasonable evidence to believe that an Team Member is under the influence of alcohol or illegal drugs; when a Team Member is involved in an on-the-job accident where personal injury or damage to company property occurs; or as part of a follow-up program to treatment for alcohol or drug abuse.

The Company is an Equal Opportunity Employer. The Company does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for 60 days. At the conclusion of this time, if I have not heard from the Company and still wish to be considered for employment, it will be necessary to fill out a new application.

Signature of Applicant: _____ Date: _____

Printed Name: _____



AN EQUAL OPPORTUNITY EMPLOYER