



1933 S. Main Street, Middletown, CT 06457 860.346.1049 office@WIHSradio.org www.WIHSradio.org

Application for Employment

NOTE: The Company will not, except in the case of a bona fide occupational qualification or need or except as otherwise permitted or required by law, discriminate on the basis of race, color, religious creed, age, sex, marital status, sexual orientation, transgender status, gender identity or expression, national origin, ancestry, present or past history or mental disorder, intellectual disability, learning disability or physical disability with respect to hiring, compensation, promotion, discharge from employment or other terms and conditions of employment.

Please Print

Position(s) Applied For _____ Date of Application _____

Referral Source: Advertisement Employee Govt. Agency Other
 Walk - in Relative Employment Agency

Name of Source: _____

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Home Telephone: _____ Work Telephone: _____
May we contact you at work? Yes No

Salary requirement: _____ Date available for work: _____

Please list any other names by which you have been known of which we should be aware to adequately verify your identity, employment history or educational history: _____

Have you applied here before? Yes No If yes, when? _____

Have you ever been employed here? Yes No If yes, when? _____

Do you have any obligations under a Non-Compete Agreement? Yes No If yes, with whom? _____

Are you legally permitted to work in the United States? Yes No
(Proof of eligibility will be required upon employment)

Will you relocate if the job requires? Yes No

Will you travel if the job requires? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Will you work overtime if required? Yes No

Previous Employment

List your last 10 years of employers, assignments or volunteer activities, starting with the most recent, including military experience. PLEASE DO NOT WRITE "SEE RESUME". Explain any gaps in employment in the comments section below.

Employer	Dates Employed		Summarize the job responsibilities:
	From	To	
Street Address			
City, State, Zip			
Job Title			
Immediate Supervisor			
Reason for leaving			
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	From	To	
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Comments (including explanation of any gaps in employment): _____

Educational Background

EDUCATION TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	CIRCLE LAST YEAR ATTENDED	GRADUATED	DEGREE
High School			9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business, Trade or Other			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Accomplishments

Use the space below to describe the skills and aptitudes that you feel qualify you for a position at the company.

References

Lists names and telephone number of three business/work references that are not related to you and are not previous supervisors. If applicable, list three school or personal references that are not related to you.

NAME	TELEPHONE	YEARS KNOWN	RELATIONSHIP

Please Read and Initial Each Paragraph Below

(if there is any part of this page you do not understand, please ask the interviewer about it before signing)

_____ I hereby acknowledge that the company may conduct a preemployment drug test and may also investigate my references, work records, education, criminal history and other matters related to my suitability for employment. I agree to provide written authorization and any other information required to obtain such information.

_____ I understand that nothing contained in the application or conveyed to me during any interview, which may be granted, is intended to create an employment contract, implied or explicit, between me and the company. In addition, I understand and agree that if I am employed, my employment relationship with the company is strictly at-will. I understand that if employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the option of either myself or the company and that no promises or representations contrary to the forgoing are binding on the company unless made in writing and signed jointly by the President and myself.

_____ I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

_____ If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance.

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

My signature below certifies that I have read and understand this complete page, and agree to the terms and conditions outlined in this document.

Applicant Signature

Date