Monticello Media/New River Radio

Employment Application

Note: Monticello Media. LLC is an AT-WILL employer and as such the employment relationship may be terminated by either party at any time with or without cause.

Discrimination because of age, race, sex, religion, color, creed, national origin, marital status, ancestry, citizenship, handicap, physical or mental disability, veteran status, sexual orientation, or any other protected status is prohibited. If you believe you have been discriminated against, you should notify appropriate state or federal agencies. Monticello Media, LLC is an equal opportunity employer

			Applicant	Inform	ation			
Full Name:	ame:				Date:			
	Last		First			М.І.		
Address:								
	Street Address						Apartment/Unit #	
	City					State	ZIP Code	
Phone:				Email				
Date Availa	ble:	Social Sec	urity No.:			Driver Lic	cense #:	
Position Applied for: Referral Source								
Are you a ci	itizen of the United Sta	Y ites?	ES NO	lf no, a	are you a	authorized to we	YES ork in the U.S.? □	NO □
Have you e	ver worked for this cor		ES NO	If yes,	when?			
Have you e	ver been convicted of	Y a felony?	ES NO					
lf yes, expla	in:							
Education								
High Schoo	l:		Address	:				
From:	То:		ou graduate'	YES ?		Diploma:		
College:			Address	:				
From:	То:	Did yo	ou graduate'	YES ?	NO □	Degree:		
Other:			Address	:				
From:	To:	Did yo	ou graduate'	YES ?	NO □	Degree:		

References

Please list	three professional references.				
Full Name:				Relationship:	
Company:				Phone:	
Address:					
Full Name:				Relationship:	
Company:				Phone:	
Address:					
Full Name:				Relationship:	
Company:				Phone:	
Address:					
	Previous E	mployme	ent		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	alary: \$		Ending Salary:\$	
Responsibil	ities:				
From:	То:	Reason f	or Leaving		
May we con	ntact your previous supervisor for a reference?	YES	NO □		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary: <u>\$</u>	
Responsibil	ities:				
From:	То:	Reason f	or Leaving		
May we con	ntact your previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary:	

Responsibilities:							
From: To:	Reason for Leaving:						
May we contact your previous supervisor for a reference?	YES	NO □					
Military Service							
Branch:		From:	То:				
Rank at Discharge:	Type of Discharge:						
If other than honorable, explain:							
Disclaimer a	nd Signa	ture					
I certify that my answers are true and complete to the be	st of my kn	owledge.					
If this application leads to employment, I understand that	false or m	isleading informati	ion in my application or				

interview may result in my release.

Signature:

Date: