



Application for Employment

NAME :	DOB : _____/_____/_____
ADDRESS :	SSN : _____-_____-_____
PHONE : HOME: _____ CELL: _____	SHIFT: <input type="checkbox"/> AFTERNOON <input type="checkbox"/> DAY <input type="checkbox"/> WEEKEND <input type="checkbox"/> NIGHT <input type="checkbox"/> HOLIDAY
IN WHICH DEPARTMENT WOULD YOU LIKE TO WORK: <input type="checkbox"/> ON-AIR <input type="checkbox"/> NEWS <input type="checkbox"/> SALES <input type="checkbox"/> OFFICE	SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
DESIRED SALARY: \$ _____ INTERNSHIP? YES NO	AVAILABLE DATE: _____
HIGHEST EDUCATION/TRAINING FACILITY:	DEGREE RECEIVED:

Do you wish to be notified before we contact your current employer? YES NO

CURRENT EMPLOYER:	SUPERVISOR:
ADDRESS:	PHONE:
JOB TITLE:	DATES EMPLOYED:

PAST EMPLOYER:	SUPERVISOR:
ADDRESS:	PHONE:
JOB TITLE:	DATES EMPLOYED:

The following questions must be answered for application to be considered:

1. Have you ever been released or discharged from a position or resigned to avoid such release or discharge? YES NO
2. Since your 18th birthday, have you ever been convicted of a felony or felony-reduced-to-misdemeanor conviction by any court? YES NO

A conviction will not necessarily disqualify you from employment.

REFERENCE 1:	ADDRESS :	PHONE :
REFERENCE 2:	ADDRESS :	PHONE :
REFERENCE 3:	ADDRESS :	PHONE :

I certify that all statements above are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I also understand that the information I have provided will be verified.

Signature: _____ **Date:** _____

Jawco, Inc.
WMOA / WJAW Radio
925 Lancaster Street
Marietta, OH 45750

740-373-1490
800-371-1490
740-373-1717 fax

www.wmoa1490.com