

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 ___

3. EMPLOYMENT HISTORY

Last Employer:

Company Name: _____

Address: _____

Street City State Zip

Phone: _____ Dates Employed: _____ to _____

Job Title: _____

Starting Pay: _____ Ending Pay: _____

Reason for leaving or desiring change: _____

Immediate Supervisor: _____

Describe duties and responsibilities: _____

Previous Employer:

Company Name: _____

Address: _____

Street City State Zip

Phone: _____ Dates Employed: _____ to _____

Job Title: _____

Starting Pay: _____ Ending Pay: _____

Reason for leaving or desiring change: _____

Immediate Supervisor: _____

Describe duties and responsibilities: _____

Previous Employer:

Company Name: _____

Address: _____

Street City State Zip

Phone: _____ Dates Employed: _____ to _____

Job Title: _____

Starting Pay: _____ Ending Pay: _____

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 (post high school):

Name City State

Dates of attendance: _____

Did you receive a degree? Yes ____ No ____ When? _____

Area of study/type of degree? _____

Name City State

Dates of attendance: _____

Did you receive a degree? Yes ____ No ____ When? _____

Area of study/type of degree? _____

5. OTHER BACKGROUND

Have you been convicted of a felony? (Do not include convictions where the records have been expunged.)

Yes ____ No ____

If Yes, please identify the crime(s) for which you were convicted, date of conviction, and the state and county where convicted:

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:

6. REFERENCES

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

Name Phone Years Acquainted

Street City State Zip

Name Phone Years Acquainted

Street City State Zip

Name Phone Years Acquainted

Street City State Zip

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.

I further understand that the company is an "at-will" employer. That means either I or the company may terminate the employment relationship, with or without notice, for any reason or no reason at any time. The at-will relationship may not be modified by oral or written statements by anyone at the company except by the General Manager acting through signed written agreement.

Date: _____ Signature

**Mail to:
Human Resources
KTTC / KXLT-TV/DT
6301 Bandel Rd NW
Rochester, MN 55901-8798**