

4-K Radio, Incorporated / KOZE AM-FM & KORT AM-FM
EMPLOYMENT APPLICATION

4-K Radio, Inc. is an equal opportunity employer. It is our policy to provide equal employment opportunity to all qualified individuals without regard to race, color religion, national origin, sex age or disability in all personnel actions including recruitment, evaluation, selection, promotion, compensation, training and termination. Such discriminatory practices are specifically prohibited by law. If you believe that your equal employment rights have been violated, you may contact the Federal Communications Commission or the appropriate state or EEO agency.

PERSONAL DATA

(PLEASE PRINT CLEARLY)

DATE: _____

NAME: _____ SOCIAL SECURITY #: _____

ADDRESS: _____ PHONE # _____

CITY: _____ STATE: _____ ZIP CODE: _____

POSITION DESIRED: _____ DATE AVAILABLE: _____

FULL-TIME PART TIME DAYS NIGHTS WEEKENDS

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? YES NO

ARE YOU OF MINIMUM WORKING AGE? YES NO

EMPLOYMENT HISTORY

(LIST PREVIOUS EMPLOYERS BEGINNING WITH THE MOST RECENT)

1) COMPANY NAME & ADDRESS: _____

POSITION HELD: _____ DUTIES: _____

SUPERVISOR: _____ DATES EMPLOYED: _____

REASON FOR LEAVING: _____

2) COMPANY NAME & ADDRESS: _____

POSITION HELD: _____ DUTIES: _____

SUPERVISOR: _____ DATES EMPLOYED: _____

REASON FOR LEAVING: _____

3) COMPANY NAME & ADDRESS: _____

POSITION HELD: _____ DUTIES: _____

SUPERVISOR: _____ DATES EMPLOYED: _____

REASON FOR LEAVING: _____

4) COMPANY NAME & ADDRESS: _____

POSITION HELD: _____ DUTIES: _____

SUPERVISOR: _____ DATES EMPLOYED: _____

REASON FOR LEAVING: _____

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EDUCATION: (UNIVERSITY, PROFESSIONAL, GENERAL EDUCATION, HIGH SCHOOL)

NAME: _____ LOCATION: _____ DEGREE: _____
NAME: _____ LOCATION: _____ DEGREE: _____
NAME: _____ LOCATION: _____ DEGREE: _____
NAME: _____ LOCATION: _____ DEGREE: _____

REFERENCES:

1) NAME: _____ RELATIONSHIP: _____
ADDRESS: _____ TELEPHONE: _____
2)NAME: _____ RELATIONSHIP: _____
ADDRESS: _____ TELEPHONE: _____
3) NAME: _____ RELATIONSHIP: _____
ADDRESS: _____ TELEPHONE: _____

I declare that the facts set forth in my application are true and complete and I authorize 4-K Radio, Inc. to investigate the accuracy and completeness of the information provided. I understand that if I am employed , false information stated in this application shall be sufficient cause for dismissal.

APPLICANT SIGNATURE: _____ DATE: _____

*Please return to the KOZE Radio Office at 2560 Snake River Avenue Lewiston ID 83501
or mail to PO Box 936 Lewiston, ID 83501. Thank you.*

FOR OFFICE USE ONLY