



## Applicant Demographic Information Form



We request this information in order to meet EEO requirements of the Federal Communications Commission. It is used to determine if our recruitment efforts are reaching all segments of the population and will be maintained confidentially and separate from your application and will not be considered in connection with your application.

(FOR INTERNAL BUSINESS RECORDS ONLY)

A. Name: \_\_\_\_\_ Date: \_\_\_\_\_

B. Vacancy applied for (Job Title): \_\_\_\_\_

C. Date you submitted application: \_\_\_\_\_

D. Male \_\_\_\_\_ Female \_\_\_\_\_

E. Nationality

- White, not of Hispanic origin-A person having origins in any of the original peoples of Europe, North Africa, or the Middle East
- Black, not of Hispanic origin- A person having origins in any of the black racial groups of Africa.
- Hispanic or Latino-A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture of origin, regardless of race.
- Asian or Pacific Islander-A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This are includes, for example, Cambodia, China, Vietnam, Japan, Korea, the Philippine Islands, and Samoa.
- American Indian or Alaskan Native-A person having origins in any of the original peoples of North or South America (including Central America), and who maintains cultural identification through tribal affiliation or community recognition.

F. What prompted you to apply? (Please check primary reason only)

- |  |   |  |
|--|---|--|
| <input type="radio"/> Advertisement          | <input type="radio"/> Employee Referral     | <input type="radio"/> School                           |
| <input type="radio"/> Agency                 | <input type="radio"/> Non-Employee Referral | <input type="radio"/> Job Fair-Give Location:<br>_____ |
| <input type="radio"/> Community Organization | <input type="radio"/> Other _____           |  |

Please list name of agency, employee, organization, advertising source, etc. and any contact info about the place or person you heard about this job opening.

\_\_\_\_\_



Pre Employment Application & Questionnaire
Lufkin Educational Broadcasting Foundation
(Equal Opportunity Employer)



Applications are considered for all positions without regard to race, color, sex, national origin, age, or the presence of a non-job-related medical condition or handicap

(PLEASE PRINT)

Date \_\_\_\_\_

Position(s) Applied for: \_\_\_\_\_ Amount of Monies needed \_\_\_\_\_

Name: \_\_\_\_\_

(last)

(first)

(middle)

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: ( ) \_\_\_\_\_ Cell Phone : ( ) \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Fax Number: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_ Social Security Number \_\_\_\_ \ \_\_\_\_ \ \_\_\_\_

Are you employed now? Yes ( ) No ( ) If so, may we inquire of your present employer? Yes ( ) No ( )

If you are employed and you are under 18, can you furnish a work permit? Yes ( ) No ( )

Have you ever filed an application here before? Yes ( ) No ( ) If Yes, give date \_\_\_\_\_

Have you ever been employed here before? Yes ( ) No ( ) If Yes, give date \_\_\_\_\_

Indicate any languages you speak, read and/or write: \_\_\_\_\_ Fluent ( ) Good ( ) Fair ( )

Are you legally eligible for employment in the United States? Yes ( ) No ( )

Have you been convicted of a felony within the last 5 years? Yes ( ) No ( )

If Yes, Explain: (conviction will not necessarily disqualify applicant)

Are you a Veteran of U. S. Military Service? Yes ( ) No ( ) If Yes, give branch: \_\_\_\_\_

The ability to lift 20 lbs or more is required – Can you lift or carry 20lbs or more? Yes ( ) No ( )

Education – Include Name and Location of School

High School: \_\_\_\_\_ Did you graduate? Yes ( ) No ( ) Highest grade attained: \_\_\_\_\_

Trade School: \_\_\_\_\_ Did you graduate? Yes ( ) No ( ) Field achieved \_\_\_\_\_

Training or subjects studied \_\_\_\_\_

College: \_\_\_\_\_ Did you graduate? Yes ( ) No ( )

Highest level or degree \_\_\_\_\_ Major and Minor \_\_\_\_\_

Give name, address and telephone number of three references who are not related to you and are not previous employers.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**Employment History**

Employer \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Dates-From \_\_\_\_\_ To \_\_\_\_\_ Work performed \_\_\_\_\_

Hourly rate/Salary \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Dates-From \_\_\_\_\_ To \_\_\_\_\_ Work performed \_\_\_\_\_

Hourly rate/Salary \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Dates-From \_\_\_\_\_ To \_\_\_\_\_ Work performed \_\_\_\_\_

Hourly rate/Salary \_\_\_\_\_ Reason for leaving \_\_\_\_\_

**Special Skills and Qualifications**

Summarize and explain how acquired \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Religious Exemption**

**Because we are a 501 c3 non-profit organization broadcasting and licensed by the Federal Communications Commission and have opted for a religious exemption, we may ask the following questions.**

Are you uncomfortable talking about Jesus Christ? Yes ( ) No ( )

Have you asked Jesus Christ to be your personal Lord and Savior? Yes ( ) No ( )

When and where did you first meet Jesus Christ? \_\_\_\_\_

Do you listen to 90.9 KSWP and/or 91.9 KAVX? Yes ( ) No ( )

Who or what was most important in leading you to Christ? \_\_\_\_\_

Could you lead someone to Christ? (Are you familiar with the plan of Salvation?) Yes ( ) No ( )

Current Church Home \_\_\_\_\_ Pastor's Name \_\_\_\_\_

Please list any Christian organizations or ministries you have volunteered or worked for in the past.

If your job required it, would you have a problem praying or ministering over the air, in person or on the phone?

Yes ( ) No ( )

What does your personal devotional time look like?

What do you believe are foundational Biblical principles required to build or work for a ministry?

State any additional information you feel may be helpful to us in considering your application \_\_\_\_\_

I understand this job requires the ability lift 20 lbs or more

I understand I may be required to work, nights, weekends and holidays

I understand KSWP/KAVX property is a smoke-free campus and smoking is not permitted while working at station events

**Applicant's Statement**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application. I understand that this application is not and is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Lufkin Educational Broadcasting Foundation /KSWP/KAVX.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Applicants, Do Not Write Below This Point

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_

Second Interview by \_\_\_\_\_ Date \_\_\_\_\_

Hired: Yes ( ) No ( ) Position \_\_\_\_\_ Department \_\_\_\_\_

Salary/Wage: \_\_\_\_\_ Date to report to work: \_\_\_\_\_