

# Community Telecast, Inc.

## Volunteer Services Application

### GENERAL INFORMATION

FULL TIME   
  PI SURVEY / SKILLS   
  REFERENCES   
  CONTRACT   
  POLICIES   
  W<sup>2</sup>   
  IS

|   |   |               |             |                        |   |
|---|---|---------------|-------------|------------------------|---|
| Last Name                                 |   | First Name    |             | MI                     | Known by other name?                        |
| Address: Street                           |   | Apt#          | City        | State                  | Zip Code                                    |
| Work Number (Direct Number)               |   | Home Number   | Cell Number | Email Address          |   |
| Emergency Contact (name and phone number) |   |               |             | Social Security Number |   |
| How did you hear about us?                | Presently Employed?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | Travel: Y / N | up to       | %                      | What is your valid Driver's License number: |

Have you ever been convicted of a misdemeanor, felony or in a military court martial? (Conviction is not an absolute bar to volunteer service) If yes, please explain.

|  |   |
|--|---|
| Is it legal for you to work in this country?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | What foreign languages do you speak, read or write? |
| Do you require visa sponsorship?<br><input type="checkbox"/> YES <input type="checkbox"/> NO             |   |

Please list all companies which currently have your resume on file (within the last 6 months).

|  |  |
|--|--|
|  |  |
|  |  |
|  |  |

### EDUCATIONAL INFORMATION

|                  |                       |     |                                |
|------------------|-----------------------|-----|--------------------------------|
| School / College | Major- Minor / Degree | GPA | Year Graduated (if applicable) |
|------------------|-----------------------|-----|--------------------------------|

Do you have any professional certifications, affiliations or licenses? Additional schooling, MBA, training, classes, etc. If so, please list.

### CAREER PROFILE

***Describe your ideal volunteer opportunity: (Give specific details regarding responsibilities, culture, job title(s), location, industry, management style, etc.)***

  
  
  
  
  
  
  
  
  
  

***Describe how you differentiate yourself from your peers (what makes you stand out from your peers): Be specific/Give statistical information. What have you done that's caused your department or company to increase revenues? What have you done that's been income saving or cost reducing for your department or company? What have you done that's saved time or increased work flow?***

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| EMPLOYMENT HISTORY   |   |                   |
|--|---|-------------------|
| Current Employer or Most Recent Employer                                 | Dates of Employment                                 |                   |
| Company Description  | # of Employees                                      | Annual Revenue \$ |
| Job Title  | General Ledger Software / Payroll System            |                   |
| Supervisor (Name and Title)  |   |                   |
| Which responsibilities do/did you enjoy the most?                        | The Least?  |                   |
| Strengths:   | Weaknesses:   |                   |
| Why would you consider leaving/why did you leave? Motivation for change? | Have you discussed this with your current employer? |                   |
| Current Annual Compensation or Hourly wage annualized:                   | Any bonus or additional compensation?               |                   |
| Date of your next review:  | Percentage increase on your last review:            |                   |
| PREVIOUS EMPLOYMENT  |   |                   |
| Previous Employer  | Dates of Employment                                 |                   |
| Company Description  | # of Employees                                      | Annual Revenue \$ |
| Job Title  | General Ledger Software / Payroll System            |                   |
| Supervisor (Name and Title)  |   |                   |
| Which responsibilities did you enjoy the most?                           | The Least?  |                   |
| Strengths:   | Weaknesses:   |                   |
| Why did you leave?   |   |                   |
| Annual Compensation or Hourly wage annualized:                           | Any bonus or additional compensation?               |                   |

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### PREVIOUS EMPLOYMENT

|  |  |                   |
|--|--|-------------------|
| Previous Employer                              | Dates of Employment                      |                   |
| Company Description                            | # of Employees                           | Annual Revenue \$ |
| Job Title                                      | General Ledger Software / Payroll System |                   |
| Supervisor (Name and Title)                    |  |                   |
| Why did you leave?                             |  |                   |
| Annual Compensation or Hourly wage annualized: | Any bonus or additional compensation?    |                   |

### TEAM BUILDING EXERCISE

**What is your ideal role when working in conjunction with a team and why?**

### EMPLOYMENT REFERENCES (prior supervisors)

| Name | Current Employer / Job Title | Phone Number | Relationship |
|------|------------------------------|--------------|--------------|
|      |                              |              |              |
|      |                              |              |              |
|      |                              |              |              |

### TERMS FOR PERFORMING VOLUNTEER SERVICES

I certify that the information I have provided in this application is accurate and complete. I understand that any falsification, misstatement or omission of any information in this application may cause me to be refused from consideration as a volunteer or may result in termination of volunteer service by Community Telecast, Inc. or Channel 22. I authorize persons, schools and organizations named on this application to provide Community Telecast, Inc. with any relevant information that is required. I further release all parties from any and all liability or claims for damages that may result from the release of information. I further understand that by filling out this form, Community Telecast, Inc. is not obligated to further process the application, nor does it guarantee placement by Community Telecast, Inc. Community Telecast, Inc. is an Equal Opportunity Employer

|   |       |
|---|-------|
| Signature, or if responding via email please check below: | Date: |
|---|-------|

I AGREE

I DISAGREE