



Franklin Communications, Inc. WBCO-AM WQEL-FM

I. General Information

Date: \_\_\_\_\_ Social Security No. \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

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

Phone: \_\_\_\_\_ Position Desired: \_\_\_\_\_

If hired, can you provide the documents required to prove that you are legally able to work in the U.S.?  
Yes  No

Please provide any special information we may need about your name or use of another name for use to be able to check your work record and otherwise verify the information given in this Application:

If under 18, please state your age. \_\_\_\_\_

Have you filed an application here before? Yes  No  If yes give date(s)

Have you ever been employed here before? Yes  No  If yes give date(s)

Are you employed now? Yes  No

If so, may we contact your present employer? Yes  No

On what date would you be available for work?

Are you available to work full time? Yes  No  Part time? Yes  No

Have you ever been convicted of a crime or are there any felony charges pending against you?

Have you ever been convicted of a crime or are there any felony charges pending against you? Yes  No

yes please explain. \_\_\_\_\_

A "yes" response does not automatically disqualify a job applicant from further consideration. Each situation is evaluated relative to the job sought. Factors such as the age and nature of the offense, and rehabilitation, will be taken into account.

If you served in the U.S. Armed Forces, please indicate:

Branch of Service \_\_\_\_\_ Rank at discharge \_\_\_\_\_

Date of Discharge \_\_\_\_\_ Dishonorable discharge? Yes  No

Describe your duties and any special training. \_\_\_\_\_

Can you perform all of the job functions of the position(s) for which you are applying, with or without a reasonable accommodation? Yes  No



Reason for Leaving:				
From:				
To:				
Reason for Leaving:				
From:				
To:				
Reason for Leaving:				
From:				
To:				
Reason for Leaving:				

May we contact the employers listed? Yes  No

If not, indicate which one(s) you do **NOT** wish us to contact: \_\_\_\_\_

### V. Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience, as well as how you believe they would be of value to WBCO-AM/WQEL-FM.

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Office Skills/PC Software Experience:

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## VI. ARBITRATION AGREEMENT

If offered employment with Franklin Communications, Inc. (the Company) I understand that offer is contingent upon my agreement to arbitrate any and all claims that the Company violated applicable law in connection with my employment by the Company. Accordingly, I agree as follows:

1. Any and all claims, disputes, or controversies that I may have in the future that the Company violated applicable law in connection with my employment by the Company or the termination of such employment will be resolved solely and exclusively by final and binding arbitration. This includes, with out limitation, any and all claims arising under Title VII of the Civil Rights Act, the Family Medical Leave Act, The Americans with Disabilities Act, the Age Discrimination in Employment Act and any other federal, state or local laws.
2. Binding Arbitration will be conducted before a mutually selected arbitrator in accordance with the rules of the Federal Mediation and Conciliation Service. Both the Company and I have the right to be represented by counsel or other authorized representative at such arbitration. The expenses of the arbitrator and the cost of a transcript of the proceedings will be paid by the Company. All other expenses, such as expenses for attorneys, shall be borne by the party incurring them.
3. The decision of the arbitrator will be final and binding on both the Company and me. The arbitrator shall issue a written award, containing findings of fact and conclusions of law within the time limits provided by National Rules for the Resolution of Employment Disputes. In determining the award, the arbitrator will be limited in authority where there is acclaim of discriminatory termination to awarding reinstatement and/or back pay. With respect to any claim to the effect that I was forced to resign due to illegal discriminatory acts by the Company, the arbitrator will be limited in authority solely to awarding money damages not to exceed back pay plus up to one year of future earning computed at my last annual compensation level with the Company. This award will be the sole and exclusive remedy of any and all claims
4. Any claims which I may have against the Company from time to time must be asserted by written notice to the Company no later than 180 days following the termination of my employment. Otherwise, all such claims will be deemed waived and the Company will have no liability for them. Arbitration of a statutory discrimination claim does not waive my right to file a charge with the Equal Opportunity Commission.
5. This agreement is not an officer of employment or a contract of employment but only an agreement to arbitrate. This agreement may not be amended, altered or waived except by the signed written agreement of both the Company and me.

I HAVE READ THIS AGREEMENT, UNDERSTAND WHAT IT SAYS, AND I AGREE TO ALL OF ITS PROVISIONS.

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Name

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Date

## VII. DISCLOSURE AND AUTHORIZATION

I certify that the information given in this Application and related documentation is true and complete without qualification. I understand that Franklin Communications, Inc. (the "Company") may investigate my work and personal history and verify all data given on this Application, on related papers, and interviews and I authorize the Company to do the same. I also authorize all individuals, school and employers named, except as specifically limited on this application, to provide information requested about me, and I release them from liability for damages in providing this information. I understand that in connection with my employment, the Company may obtain "consumer reports" regarding me and use those reports for employment purposes in order to evaluate me for employment, promotion, reassignment or retention as an employee. This inquiry and such reports may include information as to my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, names and dates of previous employers, reason for termination of employment, job performance, work experience and auto accidents. Such reports may also contain public record information, including, but not limited to my driving record, workers' compensation claims, credit, bankruptcy proceedings, criminal records, school records, tax liens and outstanding judgments from federal, state, local or other agencies and former employers which maintain such records.

I consent to the conduct of this inquiry and to the consideration of any statements of references or former employers that are given in response to the inquiry. I understand and acknowledge that the Company is entitled to rely on the representations made by me in the hiring process, and therefore I understand and acknowledge that any misrepresentation or omission of fact by me can result in immediate discharge if deemed appropriate by the Company.

I also understand and acknowledge that, if hired; my employment and compensation will be at the will of the Company and can be terminated, with or without cause, and with or without notice, at any time at the option of either Franklin Communications, Inc. or myself. I further understand and agree that no manager, representative, agent or employee of the Company, other than its President or Vice President, has now or has had in the past any authority to enter into any agreement for employment for any specified period of time or to make any agreement which is contrary to or a modification of the above described employment relationship, and that any such agreement or representation must be in writing and signed by both myself and the President or Vice President of WBCO-AM/WQEL-FM in order to be effective and will supersede this provision.

By signing below, I acknowledge that I have received and understand this Disclosure and Authorization and I authorize Franklin Communications, Inc. to obtain any consumer reports regarding me that it deems necessary. This Disclosure and Authorization shall remain on file and shall serve as ongoing authorization of WBCO-AM/WQEL-FM to obtain consumer reports for employment purposes.

Applicant's Signature \_\_\_\_\_ Dated: \_\_\_\_\_

### PLEASE READ

This application will only be considered for the six (6) month calendar period after its receipt by WBCO-AM/WQEL-FM. Should you wish to be considered after the expiration of this period, you must reapply.

Franklin Communications, Inc. is an Equal Opportunity Employer and complies with all laws prohibiting discrimination on the basis of race, color, age, sex, national origin, citizenship, handicap, height weight, and marital status. Under the federal Americans with Disabilities act, an employer has a legal obligation to accommodate an employee's or job applicant's handicap unless the accommodation would impose an undue hardship on the employer.

DO NOT WRITE BELOW THIS LINE

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

Remarks \_\_\_\_\_

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Hired: \_\_\_\_\_ Position: \_\_\_\_\_ Will Report: \_\_\_\_\_

Salary: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Date: \_\_\_\_\_

Mail your Application to  
WBCO/WQEL  
P O Box 1140  
Bucyrus, OH 44820