



TOWNSQUARE MEDIA AND ALL AFFILIATES EMPLOYMENT APPLICATION

The Company is an equal employment opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

Name _____ SSN _____ Date _____
Address _____ City _____
State, Zip _____ Phone _____ Date Available _____
Position Desired (1) _____ (2) _____

How did you hear about this position? _____

____yes ____no Did you complete high school?
Name of School _____

____yes ____no Did you complete college?
Name of College/University _____
Degree _____ GPA _____

____yes ____no Do you have special licensing or certification?
What? _____

____yes ____no Is there any reason why you could not perform any of the job duties?
If yes, explain: _____

____yes ____no Could you work in a non-smoking environment?

____yes ____no Have you ever been disciplined or fired from a job?
If yes, explain: _____

____yes ____no Have you ever been employed by our company or predecessor? If so, please provide dates and position:

____yes ____no Are you subject to any type of agreement with a current or former employer or entity that would restrict your ability to work for our Company (e.g., non-compete, confidentiality, non-disclosure)?
If yes, please explain and provide a copy of such agreement:

____yes ____no Do you have a valid driver's license and state minimum required auto insurance?

____yes ____no Can you travel locally if required?

____yes ____no Are you related to any current employee of Townsquare Media? If so, please explain relationship:

____yes ____no Can you work weekends and evenings?

____yes ____no Were/are you in the Armed Forces?

____yes ____no Are you willing to undergo a pre-employment physical exam / drug test?

(a yes or no answer to any of the above questions does not necessarily disqualify applicant from employment)

Previous Work Experience

If available, please attach your resume or fill in information below.

Begin with your present or last work experience. Include any contract work and/or volunteer work experiences.

Former Employer

Company: _____ Employed from _____ to _____

Address: _____ City _____ State _____ Zip _____

Last position title: _____

Total Annual Compensation: _____ starting _____ ending _____

Reason for leaving: _____ Hours worked each week: _____

Immediate Supervisor: _____ Phone #: _____

Duties, responsibilities, and number you supervised: _____

My initials _____ indicate my willingness for you to talk with this prior employer.

Former Employer

Company: _____ Employed from _____ to _____
Address: _____ City _____ State _____ Zip _____
Last position title: _____
Total Annual Compensation: _____ starting _____ ending _____
Reason for leaving: _____ Hours worked each week: _____
Immediate Supervisor: _____ Phone #: _____
Duties, responsibilities, and number you supervised: _____
My initials _____ indicate my willingness for you to talk with this prior employer.

List any additional skills:

computer skills, software, second languages, etc.

APPLICANTS AGREEMENT

- I understand and agree that:
- 1) If I misrepresent or deliberately leave out any fact in my application, I may be refused employment or, if employed, I may be terminated.
 - 2) I understand that my employment is contingent upon a favorable background check. If the background check has not fully completed prior to my first day of employment and it comes back unfavorable as related to the position for which I was hired and as is deemed consistent with business necessity, I understand that I may be terminated.
 - 3) The Company may verify all the information provided by me, including but not limited to my education and prior employment. I release from liability all persons or entities supplying or collecting such information.
 - 4) If I am employed by the Company, my employment is not for any specific period of time and can be terminated at any time either with or without prior notice by either me or the Company.
 - 5) If I am offered a job with the Company, I understand that I may be required to sign a non-disclosure and/or non-compete agreement as a condition of my employment.
 - 6) I authorize any doctor, hospital or testing laboratory that conducts medical tests on me to release all information to the Company necessary for the Company to determine my ability to perform job duties now and in the future, subject to local, state and federal law.
 - 7) Due to the nature of the Company's business I may be expected to work overtime, a rotating work schedule, or a work schedule that includes Saturdays, Sundays and/or holidays.
 - 8) Proof of the legal right to work in the United States will be required upon hire.
 - 9) If I am applying for a position where the need to use a company vehicle or use my own vehicle is required, I agree to provide you with my Driver's License number and I authorize the Company to obtain my motor vehicle/driving history . I also agree to submit my proof of auto insurance to the Company.
 - 10) If I am employed by the Company, I understand that I may be required to sign an arbitration agreement as a condition of my employment.
 - 11) This application is valid for 2 weeks from the date of completion.

I have read and agree to the above. I hereby certify that the facts I provided in this employment application are true and complete.

Signature _____ date _____