



**WTVJ EEO PROGRAM**

**COMMUNITY ORGANIZATION NOTIFICATION REQUEST FORM**

**WTVJ is an Equal Opportunity Employer.** Organizations that distribute information about employment opportunities to job seekers may request notices of full-time vacancies at NBC Owned Television Stations by completing and returning this form as instructed below. Please contact the station with any future changes in the general information below (e.g., contact person and e-mail address). Thank you!

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

**I. GENERAL INFORMATION (Please complete all sections.)**

Name of Organization: \_\_\_\_\_

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

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

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Name of Contact Person/Title: \_\_\_\_\_

Type of Organization: \_\_\_\_\_

**II. CATEGORIES OF JOB VACANCIES**

Community organizations may request notice of all vacancies, or only those in specific categories. Please indicate what category(s) of job vacancy notices you would like to receive. (Please select your preferences.)

- |   |   |
|---|---|
| <input type="checkbox"/> All Job Vacancies    | <input type="checkbox"/> Sales Workers            |
| <input type="checkbox"/> Officials & Managers | <input type="checkbox"/> Craft Workers (Skilled)  |
| <input type="checkbox"/> Professionals        | <input type="checkbox"/> Operators (Semi-skilled) |
| <input type="checkbox"/> Technicians          | <input type="checkbox"/> Laborers (Unskilled)     |
| <input type="checkbox"/> Office & Clerical    | <input type="checkbox"/> Service Workers          |

**LEGAL NOTICE:** The Federal Communications Commission (FCC) requires all stations to report the names of community organizations requesting job vacancy information plus the contact person, address and telephone number of each organization in an annual EEO Public File Report that will be made available to the general public in the station's public inspection file and on its website. By requesting to be notified of job vacancies, you consent to the public disclosure of this information as required by the FCC.

**Please return the completed form via e-mail, fax or regular mail to: WTVJ/NBC 6, Ivelisse Varona, 15000 SW 27<sup>th</sup> Street, Miramar, FL 33027. E-mail: ivelisse.varona@nbcuni.com Fax: 954-622-6810**

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For Internal Use Only:

Date Received by Station: \_\_\_\_\_ Name of Station Personnel Processing Info: \_\_\_\_\_

Mode of Delivery:  E-mail  U.S. Mail  Fax  Telephone  Other

Primary Notification Selected for Vacancies: \_\_\_\_\_

Cancellation of Notice Date: \_\_\_\_\_ Contact Person for Cancellation: \_\_\_\_\_