

Employment Application

Name				
Address			<u> </u>	
City	State		- ZIP	
Home Phone	Cell Phon	ie		
Email Address				
How did you become aware o	of this opening?			
Type of employment desired	?	Full Time	Part Time	Temporary/Seasonal
Indicate shift availability		Day	Evening	Weekend
Date available for work	_		-	
Have you ever applied or wor	ked for Foothill Transit	?	Yes	No
If yes, please provide position	and dates		From	То
ii yes, piease provide positioi	Do you have any relatives or friends working at Foothill Transit?			
Do you have any relatives or if yes, please list individual's	friends working at Foot name and relationship t umentation of your iden	to you	Yes work in the Unite	
Do you have any relatives or If yes, please list individual's Can you provide original doct	friends working at Foot name and relationship t umentation of your iden	to you	Yes work in the Unite	d States? Yes
Do you have any relatives or If yes, please list individual's Can you provide original doct	friends working at Foot name and relationship t umentation of your iden	to you	Yes work in the Unite	d States? Yes
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Name	
Position	

		Employn	nent History	
Please include ten years of employment his	story, inclu			ent.
May we contact this employer?	es l	No		
Employer:		Period of Employment		Job Title/Position
		From Month/Year To Month/Year		1
Street Address:				Duties
City		State	ZIP	
Name/Title of Supervisor	P	hone Numbe	er	
Reason for leaving				
May we contact this employer?	es l	No		
Employer:		Period of E	mployment	Job Title/Position
. ,	Fro	m Month/Year	To Month/Year	1
Street Address:				Duties
City		State	ZIP	
Name/Title of Supervisor	Р	hone Numbe	er	
Reason for leaving				
May we contact this employer?	es 1	No		
Employer:		Period of E	mnlovment	Job Title/Position
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Street Address:	110	m wonth, real	TO MONIN TOU	Duties
City		State	ZIP	
Name/Title of Supervisor	Р	hone Numbe	er	
Reason for leaving				
May we contact this employer?	es 1	No		
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Employer:		od of Employ		Job Title/Position
Otro at Address a	From Mon	th/Year	To Month/Year	Duties
Street Address:				Duties
City	Stat	е	ZIP	
Name/Title of Supervisor	Phone	Number		1
Reason for leaving	1			



Name	
Position	

Previous I	Foot	hill	Tran	sit E	xper	ienc	е

Please list all previous employment with a contractor, i.e. Veolia, MV, First Transit, Penske, etc., furnishing services directly to Foothill Transit through an operating or administrative contract:

Contractor	Position	Start Date	End Date	Years/Mos.
			Total	

Skills, Qualifications and Certificates			
Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.			

Applicant Statement

I certify that all the information I have provided in order to apply for and secure work with Foothill Transit is true, complete and correct. I further certify that I, the undersigned applicant, have personally completed this application.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application or immediately discharge me from Foothill Transit's service, whenever it is discovered.

I hereby release Foothill Transit, its officers, agents, employees and representatives and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigations or disclosures, including, without limitation, seeking and gathering and using such information.

I understand I may be required to satisfactorily take and pass a pre-employment drug and alcohol screening examination before I may be considered for employment. I also understand I may be subject to random, post accident and reasonable suspicion drug and alcohol testing during the course of employment. Testing positive, refusing to test within the designated time period or submitting an adulterated specimen for a random, reasonable suspicion or post accident drug and alcohol screening during my employment will be considered grounds for termination.

(Continued on next page)



Name	
Position	

Applicant Statement (continued)

If I am applying for a position that requires the operation of a Foothill Transit vehicle, I am required to possess a current and valid driver's license and agree to provide Foothill Transit a certified copy of my driving record. I also understand that any offer of employment is contingent upon my ability to be covered by Foothill Transit's vehicle insurance policy.

I understand that Foothill Transit abides by an employment-at-will policy. Either the company or the employee may terminate the employment relationship at any time, for any reason, with or without notice. Additionally, nothing contained in this employment application or anything conveyed during the interview, or by a representative of Foothill Transit is intended to create an employment contract explicit or implied. I also understand and agree that any future changes in my title, duties, compensation, working conditions, benefits or company policy and procedures will not alter this at- will agreement.

I understand that no supervisor or representative of Foothill Transit is authorized to make any assurances contrary to of any of the terms or conditions herein described.

Should a search of public records (including records documenting arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment) be conducted by internal personnel employed by Foothill Transit, I am entitled to copies of any such records obtained by Foothill Transit unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing Application	ant Statement.
Signature of Applicant	Date