

**Transit Team, Inc.**

**Application for Employment**

Answer All Questions Completely – Please Print – Be Sure to Complete All Pages!

LAST NAME	FIRST	MIDDLE	CURRENT DATE	
HAVE YOU EVER BEEN KNOWN BY AN ALIAS OR ANOTHER NAME? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>If Yes, what?</i>			SOCIAL SECURITY NUMBER	
ADDRESS	Apt#	CITY	STATE	ZIP CO
HOME TELEPHONE NO.	EMERGENCY NUMBER AND NAME			

E-mail address: \_\_\_\_\_

If hired, can you furnish proof that you are eligible to work in the United States?  No  Yes

**APPLYING FOR WHAT POSITION?** \_\_\_\_\_ **RATE OF PAY EXPECTED** \_\_\_\_\_

Full Time  Part Time  Days  Evenings  Nights  Weekends

Have you **worked** for Transit Team, Inc. before?  No  Yes

*If Yes, when?* \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Have you **applied** for work with Transit Team, Inc. previously?  No  Yes

*If Yes, when?* \_\_\_\_\_

Do you know anyone currently employed by this company?  No  Yes

*If Yes, who?* \_\_\_\_\_

Other than juvenile convictions and minor traffic violations, have you ever been convicted of violating the law – in Minnesota or in any other state or country? (You are “convicted” of an offense if you pled guilty or were found guilty, and even if you spent no actual time incarcerated for the offense.)  No  Yes

If YES, *as to each such conviction*, explain: Date; Location; Offense (felony, gross misdemeanor, misdemeanor, etc.); Circumstances; Time (if any) spent in jail: \_\_\_\_\_

An answer of “yes” will not automatically disqualify you from consideration.

Please provide education information requested for reference purposes – required for supervisory or office position.

EDUCATION	NAME AND ADDRESS	DID YOU GRADUATE?	MAJOR
High School			
College	Did you attend within the last 5 years? <input type="checkbox"/> No <input type="checkbox"/> Yes		
Other	Did you attend within the last 5 years? <input type="checkbox"/> No <input type="checkbox"/> Yes		

Have you ever worked in a position similar to the one for which you are applying?  No  Yes

If yes, indicate specific experience \_\_\_\_\_

\_\_\_\_\_

**WORK HISTORY** – List last three employers; list most recent employer first.

COMPANY NAME (MOST RECENT)		PHONE (      )
ADDRESS	CITY	STATE
		<input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME
POSITION & RATE OF PAY	SUPERVISOR'S NAME & TITLE	DATES OF EMPLOYMENT FROM                      TO
DESCRIBE WORK YOU DID	REASON FOR LEAVING	

COMPANY NAME (MOST RECENT)		PHONE (      )
ADDRESS	CITY	STATE
		<input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME
POSITION & RATE OF PAY	SUPERVISOR'S NAME & TITLE	DATES OF EMPLOYMENT FROM                      TO
DESCRIBE WORK YOU DID	REASON FOR LEAVING	

COMPANY NAME (MOST RECENT)		PHONE (      )
ADDRESS	CITY	STATE
		<input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME
POSITION & RATE OF PAY	SUPERVISOR'S NAME & TITLE	DATES OF EMPLOYMENT FROM                      TO
DESCRIBE WORK YOU DID	REASON FOR LEAVING	

Have you ever been discharged by an employer?     No     Yes      *if yes, explain:* \_\_\_\_\_

May we contact the employers listed above?     No     Yes      *If No, explain:* \_\_\_\_\_

**LIST ALL PERIODS OF UNEMPLOYMENT**

FROM	TO	FROM	TO	FROM	TO
HOW DID YOU SPEND THIS TIME?		HOW DID YOU SPEND THIS TIME?		HOW DID YOU SPEND THIS TIME?	

**MILITARY STATUS**

HAVE YOU SERVED IN THE U.S. ARMED FORCES? \_\_\_\_\_ BRANCH \_\_\_\_\_ DATES: FROM \_\_\_\_\_ TO \_\_\_\_\_

**SHOW SPECIAL COURSES OR TRAINING THAT WILL HELP YOU AS A DRIVER:** \_\_\_\_\_

**WHICH SAFE DRIVING AWARDS DO YOU HOLD AND FROM WHOM?** \_\_\_\_\_

**LIST COURSES AND TRAINING OTHER THAN SHOWN ELSEWHERE IN THIS APPLICATION**

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**LIST SPECIAL EQUIPMENT OR TECHNICAL MATERIALS YOU CAN WORK (OTHER THAN THOSE ALREADY SHOWN)**

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## **TO BE READ AND SIGNED BY APPLICANT**

**All employees are required to:**

- **Have a yearly criminal background check of the last 15 years done by the BCA for Transit Team, Inc.**
- **Have a six month check on their driving record done by Transit Team, Inc.**
- **Employees are responsible to get/have/maintain a DOT physical**
- **Inform HR Department in they should become insulin dependant**
- **Employees are responsible to get/have/maintain a Minnesota Drivers License**
- **Employees are responsible to attend Transit Team, Inc. sponsored training classes and renew those classes when needed or deemed necessary by Transit Team, Inc.**

Transit Team, Inc. is an equal employment opportunity employer. In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or handicap. None of the questions in this application are intended to elicit information regarding any protected characteristics, nor imply any limitation, illegal preferences, or discrimination based upon non-job related information or protected characteristics.

### **THIS APPLICATION DOES NOT CREATE A CONTRACT OF EMPLOYMENT.**

If you are hired by Transit Team, Inc., you will be employed on an at-will basis. As an at-will associate, you may terminate your employment at any time for any reason, without notice. Similarly, if you are hired, Transit Team, Inc. will have the right to terminate your employment at any time, for any reason, without prior notice regardless of the date of payment of wage or salary. No Transit Team, Inc. supervisor or manager has the authority to offer or promise anything other than at-will employment.

**I authorize you to make such investigations and inquire of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquires in connection with my application.**

**By my signing below, I promise that the information provided to the company, in this application or at any time, is true and complete. I understand that any false or misleading information given in my application or interview(s) may disqualify me from further consideration for employment. In the event of employment, I understand that any false or misleading or omitted information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company, as permitted by law.**

**All applicants must read, understand and agree to compliance with company policies and procedures before placement on the Transit Team, Inc. payroll. Please ask questions if any items are unclear to you.**

**I agree to comply with the policies and procedures of Transit Team, Inc.**

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Date

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Applicant's Signature