

Employment Application

Position Applied For		Date			
	ervices, and employment is available to all p ication and/or interview process should not	ersons. Those applicants requiring reasonable tify the Human Resources Department.			
Name					
Address					
City State		ZIP			
Home Phone	Cell Phone				
Email Address					
How did you become aware	of this opening?				
Type of employment desired	d? Full Time	Part Time Temporary/Seasonal			
Indicate shift availability	Day	Evening Weekend			
Date available for work	Desired rate of pa	ay Hourly Annually			
Have you ever applied or wo	orked for Foothill Transit?	Yes No			
If yes, please provide position	on and dates	From To			
Do you have any relatives o	r friends working at Foothill Transit?	Yes No			
If yes, please list individual's	s name and relationship to you				
Can you provide original doo	cumentation of your identity & eligibility to	o work in the United States? Yes 🗌 No			

Can you provide original d	locumentation of your identity	y & eligibility to work in the United States?
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Yes		No
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Educational Background				
Institution	Did you graduate? **	Name of School and address	Degree or Diploma	
High School	Yes No		-	
College/University	Yes No			
	Yes No			
	Yes No			
** Comments/Status				



Name

Position

Foothill Transit

Employment History

Please include ten year	s of employment history,	, including periods of unemployment.

May we contact this employer?	No			
Employer:	Period of Employment		Job Title/Position	
	From Month/Year To Month/Year			
Street Address:			Duties	
City	State	ZIP		
Name/Title of Supervisor	Starting Pay	Ending Pay		
Phone Number	Reason for leav	/ing		
May we contact this employer?	No			
Employer:	Period of E	mployment	Job Title/Position	
	From Month/Year		1	
Street Address:			Duties	
City	State	ZIP		
Name/Title of Supervisor	Starting Pay	Ending Pay		
Phone Number	Reason for leav	/ing		
	٦			
May we contact this employer?	No			
Employer:	Period of E	imployment	Job Title/Position	
	From Month/Year	To Month/Year		
Street Address:			Duties	
	-			
City	State	ZIP		
Name/Title of Supervisor	Starting Pay	Ending Pay		
Dhana Numhan	Decess for less			
Phone Number	Reason for leav	/ing		
May we contact this employer? Yes	No			
Employer:		mployment	Job Title/Position	
Otre et Aslaha est	From Month/Year	To Month/Year		
Street Address:			Duties	
City	State	ZIP		
City	Siale	ZIP		
Name/Title of Supervisor	Starting Pay	Ending Pay		
	Starting Pay	Ending Pay		
Phone Number	Reason for leav	/ing	1	
	1			



Name
Position

Previous Foothill Transit Experience

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	Mos./Years
			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 except where there is a collective bargaining agreement in effect. In such circumstances, the terms of the collective bargaining agreement take precedence. However, for employees not covered by a collective bargaining agreement the following terms apply: 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 wave 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 Applicant Statement.

Signature of Applicant

Date