

Bay Area Rural Transit

Application for Employment

	RMATION		Date			
Name						
	Last	First	Middle			
Present Address	Street	City		State	Zip	
Permanent Address					·	
	Street	City		State	Zip	
Phone No.						
Referred By		Are you	ı 18 years of age or o	der? Yes	No	
EMPLOYMENT DE	:SIKED					
		Date Yo	NII.	Salary		
Position		Can Sta		Desired		
re You Employed Now? ☐ Yes ☐ No			If So May We Contact Your Present Employer? Yes No			
o rou ampoyou mom		10411	odom Employon —	- 100 110		
Ever Applied to this Company Before? Yes No			Where? When?			
	Marine and Application of the Control of the Contro		Circle	Did You	Subjects Studied	
EDUCATION	Name and Local	ion of School	Last Year Completed	Graduate?	Degree(s) Recei	
High School			1234	Yes No		
High School				140		
High School						
			1234	Yes		
High School College			1234	Yes No		
			1234	l l		

GENERAL Are you related to anyone who is currently employed by Bay Area Rural Transit? If yes, please specify: Name of Relative(s) Relationship Position Do you have a valid Driver's License? ☐ Yes ☐ No Driver's License # If yes, issued by what state? Do you have current automobile liability insurance? ☐Yes ☐ No Do you have a CDL? ☐Yes ☐ No Passenger Endorsement ☐ Yes ☐ No If yes, what classifications? Have you ever been convicted of, or plead no contest to, any felony or misdemeanor for violation of any federal law, Wisconsin law, any laws of any other state or ordinances of any municipality or are there any criminal charges pending against you? (Not necessary to include traffic violations.) ☐ Yes ☐ No If yes, please list jurisdiction (location), date(s), and charge(s): Have you ever tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by USDOT agency drug and alcohol testing rules during the past two years? ☐ Yes □ No If yes, have you been evaluated by a Substance Abuse Professional (SAP) as required by 49 CFR Part 40, Subpart O (40.285)?

If yes, did you complete USDOT's Return-to-Duty process, including follow-up testing, as required by 49 CFR Part 40, Subpart O?

☐ Yes

□ No

Note: A written report from the SAP is required.

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☐ Yes ☐ No

Month and Year	Name and Address of Employer	Phone Number	Supervisor	Salary (upon leaving)	Position	Reason for Leaving
From				_		
То		701741111111111111111111111111111111111		,		
From					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
То						
From						
То						
From	_			· ·		
То						
REFERENCE	S List below three persons not rela	ated to you, whom yo	ou have known at	least one year.		
Name		Address		Phone Number	Position	Years Acquainted
1						
2						
3						
at any laise statemer atter when discovere		on this application	is sufficient caus	e for refusal to hire, or	dismissal if I have	e been employed, no
y application of result eneral reputation to the ferences listed above	employment is conditioned on a b ne, and I authorize my former en ne Company, without giving me p from any and all claims, demand	iployers and referei rior notice of such is or liabilities arisir	nces to disclose disclosure, in ad ng out of or relate	Information regarding a dition, I release the Co ed to such investigation	my former employ ompany, any form n or disclosure.	ment, character and all er employers and all
any time, with or w	ee that nothing contained in t derstand and agree that if I an lithout cause and without prior ne, and I understand that no s representative.	nired, my emplo notice, at the optic	yment will be " on of either mys	at will" and without elf or the Company b	fixed term, and I	may be terminated
nd I request that the ex y personnel file. I und	ent I agree to submit to a medical or drug test at any time deemed a xamining doctor disclose to the Co lerstand that my employment or test, if required, and if I am hired	appropriate by the C Impany the results of continued employm	Company and as of the examination nent, to the exter	permitted by law. I con n, which results shall re nt permitted by law is	199nt to such exa main confidential contingent upon	minations and tests, and segregated from
inderstand that accep	stance of this form does not indicates, policies and procedures. The	ate there is a position	eob bas aego ga	s not obligate the Com	many to hiro. If hi	rad Lagran to oblide
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Return to: Bay Area Rural Transit P.O. Box 612 2216 E 6th St Ashland, WI 54806