

Cape Ann Transit Management Co., Inc.

3 Rear Pond Rd, Gloucester, MA 01930

Application for Employment

Note to Applicant: Please advise us in advance if you require an accommodation to complete this application.

(Location), is an Equal Employment Opportunity employer. (Location) does not discriminate against any applicant or employee on the basis of race, color, sex, religion, national origin, age, disability, or any other consideration made unlawful by applicable federal, state, or local laws.

As a matter of policy and for the safety of the communities we serve, (Location) consistently applies background checking standards to all applicants. It is essential that all information requested, including educational background, work, and residential history, be complete and accurate.

Instructions: Please type or print in black or blue ink. Answer all questions, checking all boxes that apply. Answer "none" on questions that do not apply. Additional forms are available for each section if needed.

GENERAL INFORMATION						
Last Name		First	Middle	Date of Application:		
Present Address: Street		City	County	State	Zip	From (mo/ yr)
Email address:				If hired, can you present evidence of your legal right to work in the US? Yes No		
Telephone Number and Area Code: Primary () Secondary ()						
List any other names that you have used in the past 7 years						
Name Used		City	County	State	From / To	
List all addresses for the past 7 years						
Street		City	County	State	From (mo/yr)	To (mo/yr)
Have you ever been fired or asked to resign by an employer? (Circle one)		If yes, explain:				
Yes No						
What position are you applying for?		Minimum salary / wage requirement:				
How were you referred to our company?		Website Bus Advertisement On-line Ad State Employment Agency Job Fair				
		Employee referral: Other:				
		Are you applying for: Full-time Part-time		Are you able to work: Days Evenings Weekends		Previous Military Service: Yes No
EDUCATIONAL BACKGROUND						
	Name and city/state of school or college	Circle highest grade	Did you graduate?	What was your degree and major?		
High School and/or G.E.D.		9 10 11 12	Yes No			
College		1 2 3 4	Yes No	Degree _____ Major _____		
Trade, Business, Correspondence or Graduate School		Degree / Certificate earned:	Yes No	Degree _____ Major _____		
List any other training or educational programs of note:						

EMPLOYMENT HISTORY

All employment for the past five (5) years must be noted below, including jobs held while in school or while in the military. Record your present or most recent position first and go back in chronological order from today's date. Any gaps in employment greater than 30 days must be explained. You do not need to be currently employed to be eligible for hire.

Employer name:		Dates employed (mo/yr):		Salary / pay rate:	
		From: /	To: /	Beginning:	Ending:
Employer address:		Employer phone #:		Supervisor's name & title:	
Position(s) held:		Briefly explain your job duties & responsibilities including supervisory experience:			
May we contact this employer?		Reason for leaving:			
Yes No					
Employer name:		Dates employed (mo/yr):		Salary / pay rate:	
		From: /	To: /	Beginning:	Ending:
Employer address:		Employer phone #:		Supervisor's name & title:	
Position(s) held:		Briefly explain your job duties & responsibilities including supervisory experience:			
May we contact this employer?		Reason for leaving:			
Yes No					
Employer name:		Dates employed (mo/yr):		Salary / pay rate:	
		From: /	To: /	Beginning:	Ending:
Employer address:		Employer phone #:		Supervisor's name & title:	
Position(s) held:		Briefly explain your job duties & responsibilities including supervisory experience:			
May we contact this employer?		Reason for leaving:			
Yes No					
IDENTIFY AND EXPLAIN ANY EMPLOYMENT GAPS, OR PERIODS OF UNEMPLOYMENT OF 30 DAYS OR LONGER THAT HAVE OCCURRED IN THE PAST 5 YEARS (Information is used for confirming work history. You need not be currently employed at the time of application to be eligible for hire).					
Dates:		Reason:			
From:	To:				
ADMINISTRATIVE SUPPORT APPLICANTS ONLY					
Type of Experience	Length of experience		Type of experience		Length of experience
AP/AR			Microsoft Excel		
Multi-line phone system			Microsoft Word		
Typing / key-boarding		WPM:	Microsoft Outlook		
10-key calculator		Accuracy:	Microsoft PowerPoint		
List any other skills which are relevant for the position you seek:					

OTHER COMPUTER EXPERIENCE		
Software & Hardware (PC or platforms)	Length of Experience	Skill level (beginner, moderate, expert)

ADDITIONAL QUALIFICATIONS
Briefly describe any other relevant qualifications

APPLICANT'S STATEMENT AND RELEASE

I certify that all statements made on this Application for Employment and in any subsequently executed questionnaire or employment documents are true and correct. I understand that any material falsifications or omissions made on this application, or on any pre-employment document, may result in termination of my candidacy or any subsequent employment. **If an employee relationship is established, I understand that such employment is terminable at will at any time, for any reason, with or without cause, and with or without notice. I also understand that any period of employment is not for any specific duration.** In addition, I understand **that no one is authorized to make oral exceptions to this policy, and written exceptions are permitted only when they are signed by the President of this company, or his or her designee.** I authorize the Company and its representatives to conduct background evaluations and obtain information including but not limited to, criminal history checks from federal, state or local authorities, the Department of Transportation (DOT) and/or the Federal Transportation Administration (FTA). I hereby expressly authorize such inquiries and fully release and discharge the Company and consumer reporting agency, their respective affiliates, subsidiaries, directors, officers, employees, agents and attorneys thereof, and each of them, and any individual, organization, entity, agency, or other source providing information to a consumer reporting agency from all claims and damages arising out of or relating to any investigation of my background for employment purposes. This release is valid for all federal, state, county and local agencies, authorities, previous employers, military services and educational institutions.

<p>*Note to Massachusetts' Applicants: Initial: _____ I understand that it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.</p>

I acknowledge that any offer of employment is conditioned upon my taking an employment substance abuse test(s) and the Company's receipt of satisfactory results of such a test(s) and receipt of satisfactory background checks and, if necessary to determine ability to perform essential duties of the position offered, the satisfactory results of physical examination. This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Applicant Name:		Date:	
Applicant Signature:			

Note: This Application for Employment will be considered active for 90 calendar days.

INTERNAL USE ONLY			
(Print) Name of General Manager	Title:	Your location #:	Date:
Signature of General Manager:			

APPLICANT DISPOSITION:	
A. Applicant withdrew from process	F. Failed pre-employment test or license requirement
B. Disclosure of a disqualifying event	G. Does not meet minimum age requirement
C. Cannot work required hours	H. Conditional offer made
D. Application reviewed—not selected	I. Falsification of Application
E. Interviewed—not selected	