

# Consolidated Bus Transit, Inc

50 Snediker Avenue

Brooklyn, NY

Tel: (718)-346-9600

An Equal Opportunity Employer

## APPLICATION FOR EMPLOYMENT

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### PERSONAL

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Number: (\_\_\_\_) \_\_\_\_\_

Position Desired? \_\_\_\_\_

Can you perform the essential functions of the position for which you are applying with or without a reasonable accommodation?

\_\_\_\_\_

Are you subject to any work restriction based on an agreement with a prior employer? \_\_\_\_\_

Are you available to work overtime if necessary? \_\_\_\_\_

When would you be available to begin work? \_\_\_\_\_

Are you legally eligible to be employed in the United States? YES [ ] NO [ ]

(Proof of identity and eligibility will be required upon employment.)

Are you over the age of 18 years? YES [ ] NO [ ]

(If no, you may be required to provide authorization to work.)

Have you ever worked for this company before? YES [ ] NO [ ]

If yes, where? \_\_\_\_\_

When? (Give dates) \_\_\_\_\_ Job Title: \_\_\_\_\_

Do you have any relatives or friends who work for the company? YES [ ] NO [ ] If yes, who and where do they work?

\_\_\_\_\_

Have you ever done volunteer work? YES  NO  If yes, describe: (omit any volunteer work which reflects your race, color, religion, age, sex, sexual orientation, marital status, or disabilities.)

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Are you available to work: DAYS  NIGHTS  WEEKENDS  FULL TIME  If you cannot work full time, please explain:

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Days and Hours Available: (If employed, I will notify my supervisor in writing, should my availability change.)

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
To:							

Are you presently employed? YES  NO  If yes, may we contact your employer? YES  NO  If presently employed, why are you considering leaving?

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Do you belong to any professional, trade, business, or civic organizations that deal with the position for which you are applying? YES  NO  If yes, please explain and list offices held: (omit any volunteer work which reflects your race, color, religion, age, sex, sexual orientation, marital status, or disabilities.)

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Account for any full month since leaving school (high school or college) that you were not working:

From		To	Reason
Mo/Yr			
Mo/Yr			
Mo/Yr			

## EDUCATION

	Name and Location of School	Course of Study	No. of Years Completed	Diploma or Degree Received
High school				
College				
Vocational or Trade School				
Graduate Work				

Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying? YES  NO  If yes, please describe:

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List academic honors, extracurricular activities, offices held, etc. in high school or college: (omit any volunteer work which reflects your race, color, religion, age, sex, sexual orientation, marital status, or disabilities.)

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**EMPLOYMENT Start with your present or most recent position**

Have you ever applied for work with this company? If so, when?

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Have you ever been convicted of a felony? (Conviction will not necessarily disqualify an applicant for employment.)

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Name of Employer		Telephone Number (    )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/ Day/ Year	To Month/ Day/ Year	Rate of Pay Beginning	Final
Describe the Work Performed _____ _____			
Reason for Employment Ending _____ _____			
Name of Employer		Telephone Number (    )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/ Day/ Year	To Month/ Day/ Year	Rate of Pay Beginning	Final
Describe the Work Performed _____ _____			
Reason for Employment Ending _____ _____			

Name of Employer		Telephone Number ( )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From Month/ Day/ Year	To Month/ Day/ Year	Rate of Pay Beginning	Final
Describe the Work Performed _____ _____			
Reason for Employment Ending _____ _____			

Use an additional sheet of paper if more space is necessary.

**PERSONAL REFERENCES Give three references (not relatives or employers)**

Name	Occupation
Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____	Telephone Number ( )
Name	Occupation
Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____	Telephone Number ( )
Name	Occupation
Full Address (Including Street, City, State & Zip) Street _____ City _____ State _____ Zip _____	Telephone Number ( )

**APPLICANTS WILL RECEIVE CONSIDERATION FOR POSITIONS, WITHOUT REGARD TO RACE, COLOR, RELIGION, AGE, SEX, EXCEPT WHERE SEX IS A BONAFIDE OCCUPATIONAL QUALIFICATION, SEXUAL ORIENTATION, MARTIAL STATUS, INDIVIDUALS WITH DISABILITES, AND EQUALLY TO DISABLED VETERANS AND VETERANS OF THE VIETNAM ERA.**

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal at any time. I authorize the Company to make an investigation concerning my background or any facts set forth in this application. I hereby release the Company, any agent appointed by the Company, and all their respective employees and employers from any liability related to or arising out of the exchange of such information.

I understand that this application is not a promise of employment. I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at any time with or without notice or cause and the Company has the same right. No one other than the President of the Company has the authority to modify this relationship or to make any agreement to the contrary. Any such modification or agreement must be in writing and signed by the authorized agent.

I understand that the Company reserves the right to require me to submit to a medical examination after an offer of employment has been made. I also understand that a drug/alcohol test may be required prior to employment and at any time during my employment to the extent permitted by applicable law. I also understand that I may be required to take other tests, such as personality and honesty tests, prior to employment and during my employment.

I understand that the Company may investigate my driving record and my criminal record and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees, and representatives, as well as other individuals who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I hereby state that all of the information that I provide on this application and in any interview is true and accurate. I understand that if I am employed and any such information is later found to be false in any respect, I may be dismissed.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT**

**Applicant's Signature** \_\_\_\_\_

**Dated** \_\_\_\_\_

**RESULTS**

Employed: YES  NO

If yes, Job Title: \_\_\_\_\_ Department: \_\_\_\_\_

Date beginning Employment \_\_\_\_\_ Compensation \$\_\_\_\_\_ per \_\_\_\_\_

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_