



Transit Management of Montgomery

2318 W. Fairview Avenue
Montgomery, AL 36108
Fax: 334-262-7366

Employment Application

**Safety Sensitive
Positions**

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

Thank you for considering applying for a position with Transit Management of Montgomery (TMM). We appreciate the time you are giving to complete this application form. It is important you fully and accurately complete this form. Please be very careful completing this application. We use a sophisticated and detailed background and employment screening process which will disclose inaccurate false and/or incomplete or omitted information. As a matter of policy and for the safety of the communities we serve, TMM consistently applies background checking standards to all applicants. It is essential all information requested including educational background, work, criminal and residential history be complete and accurate. All TMM applicants offered a position of employment are required to complete, with satisfactory results, a pre-employment drug screen. This application will remain on file for 180 days from the date herein, whereupon you should resubmit a new application if you are interested in a position with TMM.

Instructions: Please type or print in ink. Answer all questions, checking all boxes that apply. Answer "N/A" on questions that do not apply. Additional forms may be attached, as needed.

GENERAL INFORMATION

| | | | | | |
|--|------|--|--|---------------------------|--|
| Last Name | | First | Middle | Date of Application: | |
| Present Address: Street, City, State, Zip Code | | | | How long at this address? | |
| Telephone Number and Area Code Primary: () Secondary: () | | | Are you prevented from becoming lawfully employed in the U.S. because of your visa or immigration status? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| List addresses for the past 10 years | | | | | |
| Street | City | County | State | How long? (mo. /yr.) | |
| | | | | | |
| Are you able to perform, with or without reasonable accommodations, the essential functions of the job(s) you are seeking? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Position(s) applying for: | | Bus Operator <input type="checkbox"/> Mechanic <input type="checkbox"/> Service Employee <input type="checkbox"/> Other: _____ | | | |
| Have you ever pled no contest or been convicted of a felony, misdemeanor, or other crime? | | <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain: | | | |
| How were you referred to our company? | | <input type="checkbox"/> Flyer <input type="checkbox"/> Print Ad <input type="checkbox"/> On-line Ad <input type="checkbox"/> Radio TV Ad <input type="checkbox"/> State Employment Agency <input type="checkbox"/> Job Fair <input type="checkbox"/> Community Organization <input type="checkbox"/> Employee Referral: _____ <input type="checkbox"/> Other: _____ | | | |
| Have you ever worked or applied with TMM? <input type="checkbox"/> Yes <input type="checkbox"/> No | | When? | | What Position(s): | |

| | | |
|--|--|--|
| If hired, what date are you available to start work? | Are you applying for: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-Time | Are you able to work: <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Weekends |
|--|--|--|

EDUCATIONAL BACKGROUND, TRAINING, AND EXPERIENCE

| | Name and location of school or college | Circle highest grade completed | Did you graduate? | What was your degree and major? |
|-----------------------------|--|--------------------------------|--|---------------------------------|
| High School and / or G.E.D. | | 9 10 11 12 | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| College | | 1 2 3 4 | <input type="checkbox"/> Yes <input type="checkbox"/> No | Degree _____ Major _____ |

Do you speak, write or understand any foreign languages? Yes No If yes, which language(s)?

EMPLOYMENT HISTORY

All employment for the past 10 years must be listed, including jobs held while in school or in the military. Record your present or most recent position first and go back in chronological order. Resumes may not be substituted for any information requested, but may be submitted as an addendum to the completed application. Complete all questions for each position.

| | | |
|---|---|---------------------------------------|
| Employer Name: | Dates employed (mo./yr.): | Salary / pay rate: |
| | From: / To: / | Begin: End: |
| Employer address: Street, City, State | Employer phone | Supervisor's name & title: |
| | () | |
| Position(s) held: | Briefly explain your job duties: | |
| | | |
| May we contact this employer? | Reason for leaving? | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Was this position covered under the Federal Motor Carrier Safety Regulations (FMCSR)? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| | | |
|---|---|---------------------------------------|
| Employer Name: | Dates employed (mo./yr.): | Salary / pay rate: |
| | From: / To: / | Begin: End: |
| Employer address: Street, City, State | Employer phone | Supervisor's name & title: |
| | () | |
| Position(s) held: | Briefly explain your job duties: | |
| | | |
| May we contact this employer? | Reason for leaving? | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Was this position covered under the Federal Motor Carrier Safety Regulations (FMCSR)? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

| | | |
|--|---|---------------------------------------|
| Employer Name: | Dates employed (mo./yr.): | Salary / pay rate: |
| | From: / To: / | Begin: End: |
| Employer address: Street, City, State | Employer phone | Supervisor's name & title: |
| | () | |
| Position(s) held: | Briefly explain your job duties: | |
| | | |

| | |
|---|---------------------|
| May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | Reason for leaving? |
|---|---------------------|

Was this position covered under the Federal Motor Carrier Safety Regulations (FMCSR)? Yes No

EXPLAIN EMPLOYMENT GAPS OR PERIODS OF UNEMPLOYMENT OF 30 DAYS OR LONGER

| | | |
|--------|-----|---------|
| Dates: | | Reason: |
| FROM: | TO: | |
| | | |
| | | |

LICENSE INFORMATION

| State | License # | Type, Class & Endorsements | Expiration date |
|-------|-----------|----------------------------|-----------------|
| | | | |

| | | | |
|----|---|------------------------------|-----------------------------|
| A. | Have you ever been denied a license, permit or privilege to operate a motor vehicle? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| B. | Has any license, permit or privilege ever been suspended or revoked? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| C. | Have you ever been disqualified subject to Part 391 of the Federal Motor Carrier Safety Regulation? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| D. | Have you in the past three (3) years failed or refused a DOT-mandated pre-employment drug test? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| E. | Have you ever pled no contest or been convicted of a drug or alcohol related offense? (DUI, DWI, etc) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| F. | Have you ever tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you, the employee applied for, but did not obtain, safety sensitive transportation work covered by DOT agency drug and alcohol testing rules, during the past two years? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If "Yes" to any of the above, explain:

DRIVING EXPERIENCE

| | Class of equipment | Type of equipment (van, tanker, flat, etc.) | Dates | | Approximate total number of miles |
|----------------|--------------------|---|-------|----|-----------------------------------|
| | | | From | To | |
| Straight Truck | | | | | |
| Auto Van | | | | | |
| Bus | | | | | |
| Other _____ | | | | | |

List all states where you have held a CDL in the last five years:

List special driving courses or training you have received:

ACCIDENT REVIEW FOR THE PAST 3 YEARS

| | Date | Nature of Accident (head-on, rear end, upset, etc.) | Fatalities | Injuries (other than yourself) |
|----------------|------|---|--|--|
| Last collision | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Next previous | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Next previous | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | | | | |

**TRAFFIC CITATIONS / CONVICTIONS & FORFEITURES FOR THE PAST 3 YEARS
(other than parking violations)**

| Location | Date | Charge | Penalty |
|----------|------|--------|---------|
| | | | |
| | | | |

APPLICANT STATEMENT AND RELEASE

By signing this application, I agree to the following statements:

I certify all information provided on this Application for Employment and in any subsequently executed questionnaire or employment document are true and correct. I understand any material falsifications or omissions made on this application, or any pre-application document, may result in termination of my candidacy or any subsequent employment.

Transit Management of Montgomery (TMM) is an equal opportunity employer. I understand the Company recruits, hires, and promote employees without regard to race, color, religion, sex, age, national origin, citizenship, military status or disability. Individuals with disabilities who need assistance completing this application can contact the Human Resources Department to arrange suitable accommodations.

I understand in order to comply with the Federal Immigration Reform and Control Act, TMM requires all new hires to show proof of eligibility to work in the United States. If I fail to produce the required documents to Human Resources within the required time period, TMM will rescind any job offer and terminate my employment.

I hereby authorize my prior employers, all educational institutions I have attended, and all individuals whom I have listed to provide TMM and its agents or designees, any and all information they may have regarding my past employment, education, experience, and qualifications. I hereby authorize TMM to investigate and obtain any and all oral and documentary information regarding my past employment, education, experience, and qualifications. I hereby release and agree to indemnify and hold harmless TMM and all such prior employers, educational institutions, and individuals from any and all liability for providing any information regarding my past employment, experience, and qualifications.

I hereby authorize TMM, and any third-party affiliates used for investigative purposes, to obtain my driving record and criminal record from federal, state or local authorities, the Department of Transportation (DOT) and/or the Federal Transportation Administration (FTA) for the purpose of reviewing my background and history relevant to the position(s) I have applied for. I request, authorize, and consent to the release of any and all such information to TMM consistent with state and federal laws and hereby release and agree to indemnify and hold harmless every person or entity that communicates such information to TMM from any and all liability for providing any information regarding my driving record or criminal record.

I acknowledge TMM is a drug-free workplace and any offer of employment is contingent upon my submittal to a drug screen and the Company's receipt of satisfactory results of such testing, receipt of satisfactory background checks and, if necessary to determine ability to perform essential duties of the position offered, the satisfactory results of a physical examination.

This certifies 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's Printed Name

Date

Applicant's Signature

APPLICANT EEO DATA FORM

(Optional)

The information requested is being collected for the purpose of reporting to Federal and Equal Employment Opportunity Agencies and will not be considered as part of the application for employment. It will be separated from the application

| | |
|------------------------------|-----------------------------|
| Position Applied For: | Date of Application: |
| | |

(Check mark preferred for all of the following categories)

| | | | | |
|--|-------------------------------|---------------------------------|--|--|
| Gender | <input type="checkbox"/> Male | <input type="checkbox"/> Female | Ethnic Origin | |
| | | | <input type="checkbox"/> White (not Hispanic or Latino) | <input type="checkbox"/> Black or African American (not Hispanic or Latino) |
| Veteran | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> America Indian or Alaskan Native (not Hispanic or Latino) |
| Surviving Spouse of Veteran who has not remarried | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Native Hawaiian or Other Pacific Islander (not Hispanic or Latino) | <input type="checkbox"/> Asian (not Hispanic or Latino) |
| Orphan of Veteran | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> Two or More Races (Not Hispanic or Latino) All persons who identify with more than one of the above five races. | |

| | |
|--|--|
| How did you first find out about this job? | |
| <input type="checkbox"/> TMM/ Employee | <input type="checkbox"/> Television |
| <input type="checkbox"/> Recruitment Poster | <input type="checkbox"/> www.montgomerytransit.com |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> College/University Career Day | <input type="checkbox"/> Other (specify): |

Transit Management of Montgomery is an equal opportunity employer. It is the policy of this company to consider all job applications on the basis of merit without regard to race, color, religion, sex, age, national origin, ancestry, marital status, disability or any other protected characteristic.