

Southeast Area Transit District 21 Route 12, Preston CT 06365

## **Application for Employment**

Please type or print in black or blue ink. Answer all questions, checking all boxes that apply. Answer with "No" or "Not Applicable"

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

Instructions:

Southeast Area Transit District (SEAT) is an Equal Employment Opportunity employer. SEAT does not discriminate against an 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, SEATconsistently applies background checking standards to all applicants. It is essential that all information requested, including educational background, work, criminal and residential history, be complete and accurate.

(IVA) on questions that do not apply. Additional forms are available for each section if needed.						n needed.				
								Date:	1	1
				<b>GENERAL IN</b>	FORM	ATION				
Last Name				First				Middle		
Present Address:	Street		City	Co	ounty	State	Zip	How long?	(mo/ y	yr)
Telephone Number					Email a	ıddress:		If hired, car		
Primary ( )	S	econdary (	)							legal right to ☐ Yes ☐ No
		List any o	ther r	names that you	have us	sed in the past 10	) years			
	Name Used			City		County	State		From	/To
List all addresses for the past 10 years										
	Street			City		County	State	Zip	Но	w long? (mo/yr)
_				_	·					_

Have you ever been fired or asked to resign by an employer?		If yes, explain:			
What position are you applying for?		Minimum salary / wage requirement:			
	_				
How were you referred to our company?	☐ Banner ☐ F	, — =	Ad Radio/TV Ad State vee referral-Name:	Employment Agency	
Have you ever worked for Southeast Area Transit District?  Yes No		Where?	When?		
Have you ever applied to Southeast A District?  Yes No	Area Transit	Where?		When?	
If hired, what date are you available to start work? / /			Are you applying for:  ☐ Full-time ☐ Part-time	Are you able to work:  ☐ Days ☐ Evenings ☐ Weekends	

SEAT is an Equal Opportunity Employer that values diversity

EDUCATIONAL BACKGROUND							
	Name and location of school or college	Circle highest grade completed	Did you graduate?	What was your degree and major?			
Elementary and Junior High / Middle School		1 2 3 4 5 6 7 8					
High School and/or G.E.D.		9 10 11 12	☐ Yes ☐ No				
College		1 2 3 4	☐ Yes ☐ No	Degree			
Trade, Business, Correspondence or Graduate School		Degree / Certificate earned:	☐ Yes ☐ No	Degree			
List any other training or educational programs of note:							
List any academic honors or other special recognition you have received:							
List any extracurricular activities and school offices of note:							

## **EMPLOYMENT HISTORY**

All employment for the past 10 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. 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 (n	no/vr):	/r): Salary / pay rate:			
	From: /	To: /	Begin	, , ,	Ending:	
Employer address:	, , , ,	Employer phon		Supervisor's nar		
				•		
Position(s) held:	Briefly explain you	r job duties & res	ponsibi	lities including sup	pervisory experience:	
May we contact this employer?	Reason for leaving	Reason for leaving:				
☐ Yes ☐ No						
Employer name:	Dates employed (n	no/yr):	Salar	y / pay rate:		
	From: /	To: /	Begin	-	Ending:	
Employer address:		Employer phon	e #:	Supervisor's nar	ne & title:	
Position(s) held:	Briefly explain you	r job duties & res	ponsibi	lities including sup	pervisory experience:	
May we contact this employer?	Reason for leaving	<b>:</b>				
☐ Yes ☐ No						
Employer name:	Dates employed (n	no/yr):	Salar	y / pay rate:		
	From: /	To: /	Begin	ning:	Ending:	
Employer address:	Employer p		e #:	Supervisor's name & title:		
Position(s) held:	Briefly explain your job duties & responsibilities including			lities including sup	pervisory experience:	
May we contact this employer?	Reason for leaving:					
☐ Yes ☐ No						

IDENTIFY.	IDENTIFY AND EXPLAIN ANY EMPLOYMENT GAPS, OR PERIODS OF UNEMPLOYMENT OF 30 DAYS OR LONGER						
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 / keyboarding	WPM:	Microsoft Outlook					
10-key calculator	Accuracy:	Microsoft PowerPoint					
List any other skills which are relevant to the position you seek:	·						

COMPUTER EXPERIENCE							
Software & Hardware (PC or Platforms)	Length of experience	Skill level (expert, moderate, beginner)					

ADDITIONAL QUALIFICATIONS								
Brief	Briefly summarize any additional qualifications you believe are important							
	APPLICANT'S STATE	MEN	IT AND RELEAS	SE				
I certify that all statements made on this Application for Employment and in any subsequently executed questionnaire or employment document are true and correct. I understand that any material falsifications or omissions made on this application, or on any preapplication document, may result in termination of my candidacy or any subsequent employment.								
with or without cause, and with or with duration. In addition, I understand that	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 be	by the General Manager of S	<u>sout</u>	neast Area Trans	at district or his or he	r designee.			
I authorize the Company and its represer criminal history checks from federal, state Administration (FTA).								
I hereby expressly authorize such inquirie respective affiliates, subsidiaries, director organization, entity, agency, or other sou out of or relating to any investigation of m local agencies, authorities, previous emp	rs, officers, employees, agen rce providing information to a ny background for employme	ts ar a cor nt pu	nd attorneys therect reporting a urposes. This relea	of, and each of them, ar gency from all claims a ase is valid for all federa	nd any individual, nd damages arising			
I acknowledge that any offer of employm results of such a test and receipt of satist the position offered, the satisfactory resu	factory background checks a							
Note: All new employees may be required to join the Amalgamated Transit Union (ATU) or become a dues paying non-member, and receive job assignments in accordance with Union seniority. Days off and hourly wage rates are administered in accordance with the Agreement between Southeast Area Transit District and Local 1209 of the Amalgamated Transit Union.								
Applicant Name:				Date:				
Applicant Signature:				·	·			
Note: This Applic	cation for Employment will	be c	considered active	for 90 calendar days.				
	INTERNAL	USE	ONLY					
Individual receiving & reviewing applicati	on: Titl	e:		Your location #:	Date:			
APPLICANT DISPOSITION:								
A. Applicant withdrew from proces				nployment test or licens	se requirement			
□ B. Disclosure of a disqualifying even		☐ G. Does not meet minimum age requirement						
<ul><li>C. Can not work required hours</li><li>D. Application reviewed—not sele</li></ul>	ected 2		H. Conditional of					
E. Interviewed—not selected								