



Application for Employment Form

To be completed by the applicant.

The information supplied in this document and in your application will be treated in the strictest of confidence.

APPLICANT NAME

Title:	First Name:	Last Name:
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DETAILS OF ADVERTISED VACANCY

Job Title:	Location:
Available Start Date:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Application should be marked "PRIVATE AND CONFIDENTIAL" and forwarded to:	Private and Confidential Director of HR PO Box 703 Terrell, Texas 75160 Or via email: hr@startransit.org

STAR Transit is an Equal Opportunity Employer and shall provide equal employment opportunity to its staff, potential employees, and applicants for employment on the basis of fitness and merit without regard to race, color, religion, national origin, political affiliation, sex (including gender identity and sexual orientation), age, genetic information, disability, veteran status, or other protected class.

APPLICANT DETAILS

Title:	First Name:	Last Name:		
Home Address:				
City:	State:	Zip Code:		
Do you have any friends or relatives working for STAR Transit?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, state names and relationship:				

CONTACT DETAILS

Mobile Phone:	Home:
Email:	

LICENSES/CERTIFICATIONS

Do you have a valid Commercial Drivers License?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Exp. Date:
If yes, what class?	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	
Do you have a passenger endorsement?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Exp. Date:
Do you have a current DOT Physical?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Exp. Date:

BACKGROUND

Have you had any moving violations and/or accidents in the past three years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
List all moving violations and/or accidents:			
In the past three (3) years, have you failed an employer's drug or alcohol test? Explain:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Have you ever been convicted for driving under the influence (DUI)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If hired, would there be anything preventing you from working as scheduled?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Would you be available to work overtime, if necessary?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If hired, could you present evidence of your U.S. Citizenship or proof of your legal right to live and work in the country?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Have you ever been terminated or asked to resign from a job? If yes, when?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Do you have any commitment to another entity or person that might affect your employment with STAR Transit? If yes, please provide brief details.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you in the last 10 years, under your name or another name, been convicted of, pleaded guilty or nolo contendere to, received deferred adjudication for, or been on any form of diversion for any criminal offense? If yes, please provide brief details.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever, under your name or another name, been convicted of a crime, which resulted with your being in prison and released from prison or paroled? If yes, please provide brief details.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

EDUCATION DETAILS			
High School, Name:	Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
College/University, Name:	Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Vocational/Business, Name:	Graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you speak, write or understand any other languages?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, which language(s)?			

QUALIFICATIONS/TRAINING			
Please attach certified copies of all qualifications and certificates of attainment			
Title		Year Obtained	
<i>CPR/First Aid</i>			
<i>Defensive Driving</i>			
Do you have any other experience, training, qualifications or skills, which you feel may make you especially suited for work at STAR Transit?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please list.			
List any computer programs with which you are familiar.			

MILITARY SERVICE

Were you ever in the armed forces?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what branch?		
Dates of Duty:	From: / /	To: / /
Have you obtained any special skills or abilities as a result of service in the military?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, describe:		

EMPLOYMENT DETAILS – APPLICANTS MUST COMPLETE

Are you currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
May we contact your current employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Name of Employer:	Phone Number:		
Position Held:	Supervisor:		
Duties/Skills:			
Start Date:		End Date:	
Reason for leaving:			
Name of Previous Employer:			
Position Held:			
Duties/Skills:			
Start Date:		End Date:	
Reason for leaving:			
Name of Previous Employer:			
Position Held:			
Duties/Skills:			
Start Date:		End Date:	
Reason for leaving:			

REFERENCE DETAILS

Name of Reference:

Position Held:

Phone Number:

Name of Organization:

Name of Reference:

Position Held:

Phone Number:

Name of Organization:

Name of Reference:

Position Held:

Phone Number:

Name of Organization:

CERTIFICATION

I hereby certify that the above information is correct and complete to the best of my knowledge and belief. I understand that, if I am employed, I will be liable to dismissal if any of the statements in my application are found to be deliberately misleading.

Applicants Name (print):

Signature:

Date: