

Date of Application: _____

Position applying for: _____

**WEST COUNTY TRANSPORTATION AGENCY
367 WEST ROBLES AVENUE
SANTA ROSA, CA 95407
707-206-9988**

APPLICATION FOR EMPLOYMENT

1. NAME: _____
Last name First name Middle initial

Have you ever used another name? (Circle response) YES NO

If yes, specify name(s): _____

2. ADDRESS: _____
Number Street City State Zip

3. TELEPHONE NUMBER(S): _____
Home Business

4. DO YOU HAVE A VALID CALIFORNIA DRIVER'S LICENSE? (Circle response) YES NO

If yes, specify class(es) and expiration date: _____

5. HAVE YOU EVER BEEN CONVICTED OF A FELONY? (Circle response) YES NO

If yes, explain: _____

Note: A conviction will not necessarily disqualify an applicant from employment.

6. HAVE YOU EVER USED ILLEGAL DRUGS? (Circle response) YES NO

If yes, explain: _____

7. EMPLOYMENT RECORD (List your last position first and include periods between jobs)

FROM mo/yr	TO mo/yr	OCCUPATION/ DUTIES	SALARY RECEIVED	EMPLOYER name/address	REASON FOR LEAVING
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8. INDICATE THE NUMBER OF DAYS YOU WERE ABSENT FROM WORK IN THE PAST TWO YEARS: _____

9. EDUCATION: Number of years completed: _____

HIGH SCHOOL: Specify Name/Location: _____

Did you graduate? (Circle response) YES NO

<u>Name/Location</u>	<u>Course of Study/Major</u>	<u>Degree/Certificate Earned</u>
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JUNIOR COLLEGE:

COLLEGE/UNIVERSITY

BUSINESS OR TRADE

I hereby certify that all statements made in this application are true and correct. I understand that any misstatement or omission herein could result in my disqualification as an applicant and/or termination from employment.

I further understand that any offer of employment will be subject to submission of fingerprints and a criminal background check, a job-related medical examination, pre-employment drug test, and possession of valid licenses and certificates required to perform the duties of the position I am seeking.

If offered employment, I understand that I will be required to provide documentation verifying my legal right to work in the United States.

DATE

APPLICANT'S SIGNATURE