

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

2. ADDRESS: _____
Number Street City State Zip

3. SOCIAL SECURITY NUMBER: _____

4. TELEPHONE NUMBER(S): _____
Home Business

5. DRIVER
LICENSE: _____
Number Class State Expiration

6. HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR?:
(circle correct response) YES (explain) NO

7. HAVE YOU EVER TESTED POSITIVE FOR A DRUG OR ALCOHOL TEST?
(circle correct response) YES (explain) NO

8. UPON EMPLOYMENT, CAN YOU FURNISH PROOF OF CITIZENSHIP?: _____
yes or no

9. 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

10. INDICATE THE NUMBER OF DAYS YOU WERE ABSENT FROM WORK IN THE PAST TWO YEARS: _____

11. EDUCATION: HIGHEST COMPLETED: _____

NAME AND LOCATION OF SCHOOL	COURSE/MAJOR	DEGREE/GRADUATION name of degree, when graduated
<u>HIGH SCHOOL</u>		
<u>JUNIOR COLLEGE</u>		
<u>UNIVERSITY</u>		
<u>BUSINESS OR TRADE</u>		

12. List in the space below any specific physical or mental conditions which would impair your performance in the position for which you are applying or which would endanger your health or safety or the health of others. What accommodations could the Agency make so that you can better perform the job applied for?

THE AGENCY MAY CONDITION AN OFFER OF EMPLOYMENT UPON THE CANDIDATE'S SUCCESSFULLY PASSING A PHYSICAL EXAMINATION.

13. USE THE SPACE BELOW FOR EXPLANATIONS OR ADDITIONAL COMMENTS:

14. CERTIFICATE OF APPLICATION *(please read carefully before signing)*

I hereby certify that all statements made in this application are true, and I agree and understand any misstatement or material facts herein will cause forfeiture on my part of any employment or payment as an employee in the service of the West County Transportation Agency. I further agree to be fingerprinted, to submit to a complete medical examination and pre-employment drug and alcohol screening and upon employment, to furnish such proof of citizenship as may be directed. Offers of employment are tendered only with the understanding that the candidate successfully complete and pass pre-employment medical exam, drug test and all licensing and certification is complete and your background check has been successfully completed.

_____ Date

_____ Applicant's Signature