

APPLICATION FOR EMPLOYMENT

MIDLAND-ODESSA TRANSIT MANAGEMENT, INC.
2910 La Force Boulevard • Midland, TX 79706 • (432) 561-9990

EQUAL OPPORTUNITY EMPLOYER

PERSONAL DATA (PLEASE PRINT)

Date: _____ Position Applied For: _____ Salary Expected: \$ _____

Name: _____

Address: _____
(Street) (City) (State) (Zip Code)

Phone: () _____ U.S. Citizen, or legally eligible to work in the U.S.? ☐ Yes ☐ No

Social Security No.: _____ Are you at least 21 years of age? ☐ Yes ☐ No

List any relatives, by blood, adoption, or marriage, working for Midland-Odessa Transit Management, Inc.: _____

**EMPLOYMENT WILL DEPEND UPON A FAVORABLE BACKGROUND INVESTIGATION,
MOTOR VEHICLE RECORD CHECK & REFERENCE CHECKS.**

BACKGROUND INFORMATION

- Have you ever served on active duty with the U.S. Armed Services? ☐ Yes ☐ No

If Yes, branch of service: _____

Period of service: _____ Rank at time of discharge: _____

Principal military duties: _____

- Were you ever convicted of or have you ever pled guilty to a felony? ☐ Yes ☐ No

If Yes, please explain the circumstances: _____

- Have you tested positive, or refused to test, within the last two years on any DOT pre-employment drug or alcohol test administered by a DOT-covered employer for which you were not hired? ☐ Yes ☐ No

MOTOR VEHICLE RECORD INFORMATION

TX driver's license? ☐ Yes ☐ No License number: _____ Expiration date: _____

TX commercial driver's license (CDL)? ☐ Yes ☐ No

Endorsements: _____ Restrictions: _____

List all moving traffic violations, if any, in the last five years: _____

EMPLOYMENT RECORD

Start with your present or last job, and describe your employment history for the last ten (10) years, including all periods of self-employment and unemployment. If you need more space, use additional paper.

Phone: () _____
Employer: _____ Address: _____
City and State: _____ Title: _____
Supervisor: _____ Employed From: _____ To: _____
Duties: _____

Hours/Week: _____

Starting Salary: _____

Ending Salary: _____
Reason for leaving: _____

Phone: () _____
Employer: _____ Address: _____
City and State: _____ Title: _____
Supervisor: _____ Employed From: _____ To: _____
Duties: _____

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REFERENCES

May we contact your past/present employers regarding your qualifications? ☐ Yes ☐ No

List three persons not related to you whom we may contact regarding your job qualifications:

	Name	Occupation	Address	Phone No.
1.	_____			
2.	_____			
3.	_____			

EDUCATION

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

Name and location of last school attended: _____

High school diploma? ☐ Yes ☐ No G.E.D.? ☐ Yes ☐ No

Technical/Vocational school? 1 year _____ 2 year _____

Community college? 1 year _____ 2 year _____ Degree: _____ Certification: _____

College/University? ☐ Yes ☐ No Circle number of years completed: 1 2 3 4 5 6

If Yes, from which college/university did you graduate? _____ Degree: _____

What languages do you speak fluently? _____

List any special licenses you hold: _____

Describe any specialized training pertinent to the job for which you are applying: _____

CLERICAL/COMPUTER SKILLS

Can you operate a personal computer? ☐ Yes ☐ No Can you use the Internet and E-mail? ☐ Yes ☐ No

What software can you use for: a) Word processing? _____ b) Spreadsheets? _____

Check other office equipment that you can use: ☐ Printer ☐ Typewriter ☐ Telephone ☐ Text telephone

☐ Fax machine ☐ Copy machine ☐ Cassette recorder ☐ Transcription machine ☐ 10-Key calculator

CERTIFICATION

I certify that all statements or responses made in this application are true and complete and that all documents are valid. I understand that deliberate misrepresentation of information in this application will be grounds for immediate dismissal. I also certify that I am able to perform the tasks/duties of the job for which I am applying with or without reasonable accommodations.

Signature

Date