## APPLICATION FOR EMPLOYMENT

MIDLAND-ODESSA TRANSIT MANAGEMENT, INC. 10300 Younger Road • Midland, TX 79706 • (432) 561-9990

## \*EQUAL OPPORTUNITY EMPLOYER\*

PERSONA	L DATA (PLEASE PRINT)	1				
Date:	Position Applied For:		Salary Expected: \$			
Name:						
Address:	(0)		(0)	(Z' C 1)		
	(Street)	(City)	, ,	(Zip Code)		
Phone: (	)	U.S. Citizen, or legally eli	igible to work in the U.S	S.? ∐ Yes ∐ No		
Email Addres	ss:					
Social Securi	ty No.:	Are you at least 21	years of age? ☐ Yes	□ No		
List any relati	ives, by blood, adoption, or man	riage, working for Midland-Od	lessa Transit Manageme	ent, Inc.:		
EMP	LOYMENT WILL DEPEND U MOTOR VEHICLE I	UPON A FAVORABLE BAC RECORD CHECK & REFE		TIGATION,		
BACKGRO	OUND INFORMATION					
• Have you e	ever served on active duty with th	ne U.S. Armed Services?	Yes □ No			
If Y	es, branch of service:					
Per	Period of service: Rank at time of discharge:					
Prir	ncipal military duties:					
• Were you e	ever convicted of or have you eve	er pled guilty to a felony?	Yes □ No			
If Y	es, please explain the circumstar	nces:				
Have you	tested positive, or refused to	test, within the last two year	rs on any DOT pre-ei	mployment drug		
-	test administered by a DOT-	· · · · · · · · · · · · · · · · · · ·				
MOTOR V	EHICLE RECORD INFOR	RMATION				
TX driver's li	cense? ☐ Yes ☐ No Licen	se number:	Expiration date:			
TX commerci	ial driver's license (CDL)?	∕es □ No				
Endorsements	s: Resti	rictions:				
List all movir	ng 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.

Employer:	Address:	
City and State:	Title:	
Supervisor:	Employed From:	To:
Duties:		
	Hours/Week:	
	Starting Salary:	
	Ending Salary:	
Reason for leaving:		
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г 1		
Employer:	Address:	
City and State:	Title:	т.
Supervisor:	Employed From:	10:
Duties:	11 /33/ 1	
	Hours/Week:	
	Starting Salary:	
	Ending Salary:	
Reason for leaving:		
	Phone: ( )	
Employer:	Phone: ( ) Address:	
City and State:	Title: Employed From:	To:
Supervisor: Duties:	Employed From	10.
Duties.	Hours/Week:	
	G G 1	
	Ending Salary:	
Reason for leaving:		
reason for leaving.		
	Phone: ( )	
Employer:	Address:	
City and State:		
	Employed From:	
Duties:		
	Hours/Week:	
	Starting Salary:	
	Ending Salary:	
Reason for leaving:		
6		
	Phone: ( )	
Employer:	Address:	
City and State:		
Supervisor:	Employed From:	To:
Duties:		
	Hours/Week:	
	Starting Salary:	
	Ending Salary:	
Reason for leaving:		

## **REFERENCES**

May we contact your past/preso	ent employers regarding you	ur qualifications?   Yes	No
List three persons not related to	you whom we may contac	t regarding your job qualification	ons:
Name	Occupation	Address	Phone No.
1			
2			
3			
EDUCATION	Circle highest grade con	npleted: 1 2 3 4 5 6 7	8 9 10 11 12
Name and location of last scho	ol 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/uni	versity did you graduate?		Degree:
What languages do you speak f	luently?		
List any special licenses you ho	old:		
Describe any specialized traini	ng pertinent to the job for w	hich you are applying:	
			_
CLERICAL/COMPUTER	R SKILLS		
Can you operate a personal cor	mputer? □ Yes □ No	Can you use the Internet and	E-mail? ☐ Yes ☐ No
		b) Spreadshe	
•			
	•	r 🗆 Typewriter 🗆 Teleph	-
☐ Fax machine ☐ Copy	machine $\square$ Cassette reco	order   Transcription machi	ne □ 10-Key calculator
<u>CERTIFICATION</u>			
documents are valid. I und	erstand that deliberate m lismissal. I also certify t	this application are true of this application of informath hat I am able to perform the commodations.	tion in this application will
	Signature		Date