



3701 96th Street S.W., PO Box 99070
 Lakewood, WA 98496-0070
 (253) 581-8080

EMPLOYMENT APPLICATION

Pierce Transit complies with Federal requirements for a drug-free workplace.



APPLICATION SHOULD BE COMPLETED IN FULL, EVEN IF SUBMITTING A RESUME IN ADDITION TO THIS APPLICATION. PIERCE TRANSIT WILL PROVIDE REASONABLE ACCOMMODATION TO APPLICANTS WITH DISABILITIES WITH ADVANCE NOTICE TO THE HUMAN RESOURCES DEPARTMENT.

POSITION APPLIED FOR: _____		DATE: _____ (MM/DD/YY)	
NAME:			
LAST	FIRST	MIDDLE	
ADDRESS:			
NUMBER	STREET	APT. #	
CITY	STATE	ZIP CODE	SOC. SEC. NO.
PHONE: () - _____		() - _____	
HOME	WORK	MESSAGE (IF DIFFERENT)	
Are you related to any current Pierce Transit employee?			
No	Yes	If Yes: NAME _____	RELATIONSHIP _____
Are you residing with any current Pierce Transit employee?			
No	Yes	If Yes: NAME _____	
Have you previously applied for a position at Pierce Transit? No Yes			
If Yes: WHAT POSITION: _____		APPROXIMATE DATE: _____	
Are you currently or have you previously been employed by Pierce Transit? No Yes			
If Yes: JOB TITLE: _____		DATES: _____ - _____	
Are you able to work any day of the week? Yes No		Any shift? Yes No	
If No, please explain _____			
Have you the legal right to work in the U.S.? Yes No			
Have you been convicted of a felony within the last 10 years? Yes No			
If yes, additional information may be required but will not necessarily disqualify an applicant.			

NAME: _____

DRIVING INFORMATION

<i>If the position requires the operation of a motor vehicle, please complete the following:</i>			FOR HR USE ONLY
Do you possess a valid Driver's License?	Yes	No	
STATE:	LICENSE NUMBER:	EXPIRATION DATE:	
CLASS:	ENDORSEMENTS:	DATE OF BIRTH:	
Has your license ever been restricted, suspended or revoked? (If yes, please explain)	No	Yes	
Have you had any moving violations within the last two years?	No	Yes	

U.S. MILITARY BACKGROUND

BRANCH OF SERVICE: _____ **DATE IN:** _____ **DATE OUT:** _____

EDUCATION AND TRAINING

TYPE OF SCHOOL	NAME & LOCATION	MAJOR SUBJECT	NUMBER OF YEARS COMPLETED					GRADUATE / DEGREE	DATES ATTENDED
			9	10	11	12	GED		
HIGH SCHOOL									-
COLLEGE									-
COLLEGE									-
GRADUATE SCHOOL									-
BUSINESS/ VOCATIONAL									-

OTHER RELEVANT COURSES AND TRAINING	NAME & LOCATION OF INSTITUTION	DATES ATTENDED
		-
		-
		-
		-

PROFESSIONAL LICENSES OR CERTIFICATES	SERIAL NUMBER	DATE ISSUED	EXPIRATION DATE

OTHER SKILLS

COMPUTER SKILLS (SOFTWARE, EQUIPMENT, ETC.): *Maximum 5 lines*

TYPING SPEED (WPM): _____ **FOREIGN LANGUAGES (FLUENT):** _____

OTHER SKILLS/EQUIPMENT/TOOLS: *Maximum 5 lines*

EMPLOYMENT HISTORY

- Please complete this section in detail
- List your work experience for the last 10 years, starting with your most recent job.
- A resume will NOT substitute for a Pierce Transit application form.
- Identify any gaps in employment.
- Attach additional sheets if more space is needed.

EMPLOYER: _____	POSITION: _____
ADDRESS: _____	DATES EMPLOYED: FROM _____ TO _____ (MM/YY) (MM/YY)
CITY/STATE/ZIP: _____	NO. OF EMPLOYEES SUPERVISED: _____
NAME/TITLE OF SUPERVISOR: _____	
PHONE: () - _____	SALARY: _____ HOURS PER WEEK: _____
REASON FOR LEAVING: _____	
JOB DUTIES: <i>Maximum 4 lines</i>	

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NAME/TITLE OF SUPERVISOR: _____	
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It is the policy of Pierce Transit, as part of the selection process, to contact former employers for reference information. By signature below, I authorize Pierce Transit to contact my former employers.

I acknowledge that employment is contingent upon successful completion of a physical examination, including a drug test. If I am applying for a safety sensitive position, I understand that my employment is contingent upon successfully completing a USDOT drug test as required by 49 CFR Part 655 and, if hired, I understand that a condition of my employment will be compliance with the Agency's Drug and Alcohol Abuse Policy, including submitting to drug and alcohol tests as described in the policy.

I certify that the information shown on this application is true and correct to the best of my knowledge. I further agree that falsifying or withholding of pertinent information given in my application or interview(s) will be grounds for non-consideration, or if employed, will be cause for dismissal. Failure to sign and date this form will also be grounds for non-consideration.

Signature _____ **Date** _____

You may contact my current employer **Yes** **Contact me first** **No**

APPLICANT FLOW DATA FORM

As a recipient of federal funds, Pierce Transit must compile statistical data on the gender, minority, and disability status of job applicants. If you wish to provide this statistical information, please indicate below. This data will be removed from the application and entered only on an applicant flow log. If you do not wish to provide this information, your status will be summarized into an "unknown" category and will not jeopardize you as a prospective employee.

POSITION APPLIED FOR: _____

DATE OF APPLICATION: _____

NAME: _____
LAST NAME FIRST NAME M.I.

STATISTICAL INFORMATION

ETHNIC CLASSIFICATION

- 1 _____ WHITE
- 2 _____ BLACK
- 3 _____ AMERICAN INDIAN
- 4 _____ ASIAN
- 5 _____ HISPANIC

GENDER

- 1 _____ MALE
- 2 _____ FEMALE

AGE 40 OR OLDER

- 1 _____ YES
- 2 _____ NO

DISABLED

- 1 _____ YES
- 2 _____ NO

WHERE DID YOU HEAR ABOUT THIS POSITION?

- 1 _____ NEWSPAPER NAME
- 2 _____ JOB LINE
- 3 _____ WALK-IN
- 4 _____ FRIEND/RELATIVE
- 5 _____ EMPLOYMENT SECURITY
- 6 _____ INTERNET
- 7 _____ OTHER