APPLICATION FOR EMPLOYMENT

Interested in: Position(s) applied for_____

Part-Time_____
Sub driver_____

Salary Expectations_____ When would you be available for work?_____

INSTRUCTIONS: Please print in ink or type all answers.

PERSONAL DATA

1. Name_____
(Last) (First) (Middle)

2. Current Address_____
Street and number, or RFD City State Zip

3. Permanent Address_____
Street and number, or RFD City State Zip

4. Driver's License No/State Issued_____ SS#_____

5. Telephone No. ( )_____ E-Mail Address_____
Area Code

6. Have you ever been convicted of a felony? Yes ☐ No ☐ Have you ever been convicted of a serious or aggravated misdemeanor? Yes ☐ No ☐ *A conviction will not necessarily disqualify you from consideration for employment.*

7. Have you served and been honorably discharged from the Military or Naval Forces of the United States? Yes ☐ No ☐

8. For purposes of compliance with The Immigration Reform and Control Act, are you legally eligible for employment in the United States? Yes ☐ No ☐ Under the Immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.

EDUCATION AND TRAINING

9.	No. Years Completed	Did You Graduate?
Elementary		
High School		
College		
Post Graduate		

10. List any special training (vocational schools, short courses, workshops, etc.)

11. If the job announcement requires completion of specific courses or training, indicate that which you have completed.

12. If the job announcement requires the operation of specific machinery or special skills, list those at which you are competent.

EMPLOYMENT RECORD

Please begin with your present or most recent employer and continue for the past fifteen years.
You may attach additional sheets if necessary.

13. Dates employed_____
Position held_____
Starting salary_____ (monthly) Final salary_____ (monthly)
Name and address of employer_____
_____
Immediate Supervisor_____
Title_____
Telephone Number_____
E-Mail Address_____
Description of Duties_____
_____
_____
_____
_____
Reason for Leaving_____

14. Dates employed_____
Position held_____
Starting salary_____ (monthly) Final salary_____ (monthly)
Name and address of employer_____
_____
Immediate Supervisor_____
Title_____
Telephone Number_____
E-Mail Address_____
Description of Duties_____
_____
_____
_____
_____
Reason for Leaving_____

15. Dates employed_____
Position held_____
Starting salary_____ (monthly) Final Salary_____ (monthly)
Name and address of employer_____
_____
Immediate Supervisor_____
Title_____
Telephone Number_____
E-Mail Address_____
Description of Duties_____
_____
_____
_____
_____
Reason for Leaving_____

16. Dates employed_____
Position held_____
Starting salary_____ (monthly) Final Salary_____ (monthly)
Name and address of employer_____
_____
Immediate Supervisor_____
Title_____
Telephone Number_____
E-Mail Address_____
Description of Duties_____
_____
_____
_____
_____
Reason for Leaving_____

17. May inquiry be made of your present employer regarding your character, qualifications and record of employment?

Yes ☐ No ☐

18. May inquiry be made of your past employer(s) regarding your character, qualifications and record of employment?

Yes ☐ No ☐

19. REFERENCES

Name_____ Address_____ Telephone Number_____
_____
_____
_____
_____

CERTIFICATION OF APPLICANT
Read carefully.

I HEREBY CERTIFY that this application contains no misrepresentations or falsifications and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should an investigation at any time disclose any such misrepresentation or falsification, my application will be rejected and I will be dismissed from my employment with RTA. I further authorize RTA to make all necessary and appropriate investigations to verify the information contained herein and give RTA permission to contact either in writing or verbatim the references noted herein and/on my resume for employment.

Signature_____ _____
(Date)

AUTHORIZATION AND RELEASE

Having made application for employment and desiring RTA to be informed as to my record(s), I hereby authorize RTA to investigate my record and I further authorize the addressed individual, company or institution to furnish ECIA with any information which may concern my record, and do hereby release the addressed individual, company or institution and all persons whomsoever from any damage on account of furnishing such information.

Signature_____ _____
(Date)

Witness_____

Please do not write below this line

Date	Interviewed by	Comments

SUPPLEMENTAL EQUAL EMPLOYMENT FORM

Your response to the following questions is voluntary and will in no way affect your opportunity for employment with RTA.

The purpose of these inquires is to assist us and those agencies involved in enforcing Equal Employment Laws in auditing our practices so that trends can become apparent in who is applying and who is actually hired.

Today's Date:_____

PLEASE CHECK THE APPROPRIATE BOX

Age:

- ☐ Under 18
- ☐ 18-45
- ☐ 46-55
- ☐ 56-65
- ☐ 66-70
- ☐ Over 70

Gender:

- ☐ Female
- ☐ Male

Ethnic Orgin:

- ☐ Black (African, Jamaican, Trinidadian or West Indian descent)
- ☐ White (Indo-European, including Pakistani or East Indian descent)
- ☐ Asian (Japanese, Chinese, Polynesian or Korean descent)
- ☐ Spanish Surname (Mexican, Puerto Rican, Cuban, Latin American or Spanish descent)
- ☐ American Indian (who identify themselves or are known as such by virtue of tribal association)
- ☐ Others (includes Aleuts, Eskimos, Malayans, Thais and others not covered by specific categories on this form)

Highest Level of Education:

- ☐ 0-8 years
- ☐ 9-11 years
- ☐ 12 years
- ☐ Over 12 years

How Did You Learn About This Job:

- ☐ Job Service of Iowa
- ☐ City Job Listing
- ☐ Other City Department
- ☐ City Employee
- ☐ Friend
- ☐ Newspaper
- ☐ School
- ☐ Relative
- ☐ Other_____

Disability:

- ☐ Mental
- ☐ Physical

Please describe:_____

_____