

# Amador County Transportation Commission

## Application for Employment

117 Valley View Way, Sutter Creek, CA 95685 ♦ Telephone: (209) 267-2282

### Title of Position for Which You Are Applying

Name

\_\_\_\_\_  
First Middle Last

Mailing Address

\_\_\_\_\_  
Street City State - ZIP

Phone

\_\_\_\_\_  
Home Business Mobile

Email

\_\_\_\_\_

READ FULLY AND RESPOND TO THE FOLLOWING QUESTIONS.	YES	NO
1. Do you have a valid driver's license to operate a motor vehicle in California? State: _____ Type of Lic: _____ Lic. No: _____ Lic. Exp. Date: _____		
2. Have you ever been employed by the County of Amador or any of its cities? If YES, give details.		
3. Do you object to the Transportation Commission making inquiry of your present employer?		
4. Have you ever been discharged from a position, or terminated during a probationary period for unsatisfactory service, or have you ever resigned upon request to avoid discharge? Give name and address of employer, date of discharge or forced resignation, and the reason.		
5. If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?		
6. Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? If no, describe the functions that cannot be performed. _____ _____  (Note, We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)		

### EDUCATION

		YES	NO
Do you possess a High School Diploma or G.E.D?			
Name & Location of College, University, or Trade School	Major Area of Study	Degree Received	
List college studies, internships and other educational experiences that are most applicable to the job being applied for.			
1. _____	2. _____		
3. _____	4. _____		

### CERTIFICATES OF TRAINING, LICENSES OR PROFESSIONAL REGISTRATION

Description	Date Issued	Registration No.

## EXPERIENCE

Begin with your most recent experience. List all experience in the last ten years, including U.S. Military Service. Give details which you believe meets the entrance requirements for this position. Go back more than ten years if necessary. If more space is needed, you may attach additional sheets but they must contain answers to questions contained in this form.

### Period of Employment

From:	To:	Total Yrs.	Total Mos.	Full-Time:	Part-Time:
Job Title:				No. Supervised:	
Most Important Duties:					
Employer Contact Information					
Employer:					
Address:					
Immediate Supervisors:				Phone No:	
Reason for Leaving:					

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Job Title:				No. Supervised:	
Most Important Duties:					
Employer Contact Information					
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Immediate Supervisors:				Phone No:	
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Job Title:				No. Supervised:	
Most Important Duties:					
Employer Contact Information					
Employer:					
Address:					
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Job Title:				No. Supervised:	
Most Important Duties:					
Employer Contact Information					
Employer:					
Address:					
Immediate Supervisors:				Phone No:	
Reason for Leaving:					

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Job Title:				No. Supervised:	

Most Important Duties:	
Employer Contact Information	
Employer:	
Address:	
Immediate Supervisors:	Phone No:
Reason for Leaving:	

REFERENCES	
<b>Reference No. 1</b> (name):	
Address (mailing):	
Phone/Email:	
<b>Reference No. 2</b> (name):	
Address (mailing):	
Phone/Email:	
<b>Reference No. 3</b> (name):	
Address (mailing):	
Phone/Email:	

WAIVER AND RELEASE	
<b>Please Read Carefully, Initial Each Paragraph and Sign Below</b>	
Initials	I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
Initials	I hereby authorize Amador County Transportation Commission ("ACTC") to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release ACTC, my former employers and all other persons, corporations, partnerships and associates from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
Initials	I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and ACTC. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or ACTC, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and ACTC's designated representative.
Initials	If offered a position, I agree that one or more background investigative reports for employment-related purposes may be performed.

**Please let us know where you learned of the job opening.** \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_