



Employment Application

Programs, services and employment are equally available to everyone. Please inform the Human Resources Department of you require reasonable accommodation for the application or interview.

PERSONAL INFORMANTION

DATE OF APPLICATION: _____

NAME: _____
First Middle Last

ADDRESS: _____
Street Apt City / State Zip

SOCIAL SECURITY #: _____ DRIVERS LICENSE NUMBER: _____

Do you have a current School Bus Permit? YES NO Do you have a Current CDL License? YES NO
 CDL License #: _____

CONTACT INFORMATION: _____
Home Telephone Mobile Telephone

Email Address

How did you learn about our Company? _____

POSTION SOUGHT: _____ Available Start Date: _____

Desired Pay Range: _____ Full Time? _____ # of hours
 Part Time? _____ # of hours

Are you currently Employed? _____ Are you 18 years of age or older? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Are you legally allowed to work in the United States? YES NO

Have you ever been convicted of a felony, or a misdemeanor involving any violent act, use or possession of a weapon, or act of dishonesty for which the record has been sealed or expunged, or do you have such a case pending? Do you further have any reason in which you have been forbidden to be around children or should not be around children? Futher indicate if you have any history that would prevent you from driving a school bus.

- No
- Yes If yes, when? Briefly describe circumstance: _____

Answering yes to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

~ Your Availability for Work~							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From:							
To:							
Total Hours per week you are available to work:	Do you have any special requests or needs for a work schedule?						



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EDUCATION HISTORY

Name and Location of High School: _____ Did you Graduate? YES NO

Name and Location of College: _____ Years Attended: _____ to _____

Degrees Completed: _____ Other Subjects Studied: _____

Trade, Business or Correspondence School: _____ Years Attended: _____ to _____

Subjects Studied: _____ Did you Graduate? YES NO

SUMMARIZE YOUR SPECIAL SKILLS OR QULAIFICATIONS

EMPLOYMENT HISTORY (begin with most recent position first)

Name of Employer:	Job Title: Duties:
Address:	Dates of Employment: From: _____ To: _____
City, State, Zip Code:	Hourly pay or Salary: Starting Pay: _____ Ending Pay: _____
Supervisor: Supervisor Telephone Number:	Reason for Leaving:

Name of Employer:	Job Title: Duties:
Address:	Dates of Employment: From: _____ To: _____
City, State, Zip Code:	Hourly pay or Salary: Starting Pay: _____ Ending Pay: _____
Supervisor: Supervisor Telephone Number:	Reason for Leaving:

Name of Employer:	Job Title: Duties:
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REFERENCES

Name of Reference:	Relationship:
Occupation of Reference:	Telephone #
How long have you known them?	
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Name of Reference:	Relationship:
Occupation of Reference:	Telephone #
How long have you known them?	

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application may be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.”

I understand and acknowledge that unless otherwise defined by applicable law or written agreement with First Holiday Tour & Travel or Holiday Express, any employment relationship with the Company is considered “employment at will.” This means the Employee may resign at any time and the Employer may discharge the Employee at any time, with or without cause, and with or without advance notice.

I have read, understand, and agree to the above statements.

Signature of Applicant: _____ Date: _____