

**CAMBRIA COUNTY TRANSIT AUTHORITY**

**APPLICATION FOR EMPLOYMENT**

**FOR NON SAFETY SENSITIVE POSITIONS**

**An Equal Opportunity Employer**

The Cambria County Transit Authority (CamTran) is an equal opportunity employer dedicated to a policy of non discrimination in employment upon any basis including race, color, religion, age, sex, national origin, ancestry, sexual orientation, marital status, disability, veteran status, or any other legally protected status. In reading and answering the following questions, please keep in mind that none of the questions are intended to apply any limitations, illegal preferences, or discrimination based upon any non-job related information.

This application will be kept active for six (6) months from the date received. To be considered for employment, **all** sections must be completed fully and accurately, even if you include a resume with this application.

**PERSONAL**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone \_\_\_\_\_  
City, State and Zip Code \_\_\_\_\_ Social Security No. \_\_\_\_\_

Have you ever worked for CamTran in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

If "Yes", from: Start Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Last Position Held \_\_\_\_\_  
Name(s) of any relatives who are employed with CamTran \_\_\_\_\_

Are your school or previous employment records under any other name than the one you use now?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If "yes", what are the other name(s) \_\_\_\_\_

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? Yes \_\_\_\_\_ No \_\_\_\_\_  
**Proof of citizenship or immigration status will be required upon employment.**

Have you ever been discharged or suspended from a prior position? Yes \_\_\_\_\_ No \_\_\_\_\_  
If the answer to the above question is "Yes", attach a statement providing details.

Type of Employment Desired (**Choose only one**)  
Part Time Only \_\_\_\_\_ Prefer Full Time, Will Begin As Part Time \_\_\_\_\_ Full Time Only \_\_\_\_\_

If you are less than 18 years of age, can you provide required proof of your eligibility to work? Yes \_\_\_\_\_ No \_\_\_\_\_

Position you are applying for: \_\_\_\_\_ Date available for work: \_\_\_\_\_

Can you travel if your job requires it? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been convicted, pled guilty or pled nolo contender to a felony or misdemeanor within the past ten (10) years?  
Yes \_\_\_\_\_ No \_\_\_\_\_

**Conviction will not necessarily disqualify an applicant from employment.**

If Yes, Please explain: \_\_\_\_\_

**EDUCATION**

Name and Location of School	Years Completed	Degree or Certificate	Course of Study	Grade Point Avg.
High School				
Business, Trade or Vocational School				
College or University				
Graduate School				
Scholastic and/or Professional Honors and/or Achievements				

**EMPLOYMENT**

List all jobs held, including part time, starting with your current or most recent job. You must complete this Section even if you include a resume. Use additional sheets of paper, if needed.

Employer	Supervisor
Address	Phone No.
Job Title	Final Rate of Pay
Duties Performed	Employed From:
Reason For Leaving	Employed To;
Employer	Supervisor
Address	Phone No.
Job Title	Final Rate of Pay
Duties Performed	Employed From:
Reason For Leaving	Employed To:
Employer	Supervisor
Address	Phone No.
Job Title	Final Rate of Pay
Duties Performed	Employed From:
Reason For Leaving	Employed To:
Employer	Supervisor
Address	Phone No.
Job Title	Final Rate of Pay
Duties Performed	Employed From:
Reason For Leaving	Employed To:

May we contact your present employer as a reference? Yes \_\_\_ No \_\_\_

May we contact you at your current place of employment? Yes \_\_\_ No \_\_\_

Please summarize below any special qualifications or skills acquired from prior employment or experience

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**MILITARY**

Did you serve in the U.S. Armed Services? Yes \_\_\_ No \_\_\_  
If "Yes", what Branch? If "Yes", what dates? From: To:

Describe experience gained in the Service.

Are you currently in the Reserves or National Guard? Yes No If "Yes", what Branch?

**MISCELLANEOUS**

List the office machines you can operate: \_\_\_\_\_

List the Computer systems you can operate: \_\_\_\_\_

If applying for a position at our Incline Plane or Bus Stop Shop, list what retail sales and/or food processing equipment you can operate: \_\_\_\_\_

List or describe any additional information that may be helpful to us in evaluating your application for employment, regardless of the position you are applying for:

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**REFERENCES – List at least three persons familiar with your work or academic background (not relatives)**

Name Phone No. Years Known

Address How Known

Name Phone No. Years Known

Address How Known

Name Phone No. Years Known

Address How Known

Name Phone No. Years Known

Address How Known

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**IMPORTANT – Applicant must read and initial each paragraph before signing this application.**  
**(This application is not complete and cannot be considered until the last page is complete.)**

By my signature and initials placed appropriately, I promise that the information provided in this application for employment (and accompanying resume, if any) is true and complete. I understand that any false information or significant omissions may disqualify me from further consideration for employment, if discovered at a later time. I agree to immediately notify the Cambria County Transit Authority (CamTran) if I should be convicted, plead guilty or plead nolo contendere to any felony or misdemeanor, or if I agree to enter a pre-trial diversion or similar program in connection with a prosecution for a felony or misdemeanor while my job application is pending, or during my period of employment, if hired.

**Initial** \_\_\_\_\_

I authorize the investigation of all statements contained in this application for employment (and accompanying resume, if any). I also authorize the Cambria County Transit Authority (CamTran) to contact my present employer (unless otherwise noted in this job application form), past employers and listed references.

**Initial** \_\_\_\_\_

I authorize any person, school, current employer (except as previously noted), past employer(s) and organizations named in this application for employment (and accompanying resume, if any) to provide the Cambria County Transit Authority (CamTran) with relevant information and opinion that may be useful to the Authority in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

**Initial** \_\_\_\_\_

If I receive a tentative offer of employment, I give permission for a complete physical examination and drug screening. I consent to the release to the Cambria County Transit Authority (CamTran) of any and all medical and drug screening information, as may be deemed necessary by the Authority in judging my capability to do the work for which I am applying. I also give permission for the Authority to complete a criminal investigation/verification prior to any employment offer.

**Initial** \_\_\_\_\_

I understand that if my employment is terminated by the Cambria County Transit Authority (CamTran) for dishonesty, vehicular accident or any criminal acts, the Authority may be notified and I may be criminally prosecuted. I also understand that, if hired, I may not hold other employment that creates a conflict of interest or adversely impacts my performance at the Authority.

**Initial** \_\_\_\_\_

I understand and agree that the Cambria County Transit Authority (CamTran) specifically reserves the right and I hereby agree to CamTran's right to conduct a background check pursuant to 42 Pa. C.S.A. Section 9791 et seq., also commonly known as "Megan's Law".

**Initial** \_\_\_\_\_

I understand that this application does not, by itself, create a contract of employment. I understand and agree that, if hired, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD OF TIME, and may, regardless of the date of payment of my wages or salary, BE TERMINATED AT ANY TIME. I understand that NO PERSON IS AUTHORIZED TO CHANGE ANY OF THE TERMS MENTIONED IN THIS EMPLOYMENT APPLICATION FORM.

**Initial** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

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*FOR HUMAN RESOURCES USE ONLY*

**Date of Interview:** \_\_\_\_\_

**Position Hired Into:** \_\_\_\_\_

**Date of Physical:** \_\_\_\_\_

**Date of Employment:** \_\_\_\_\_

