

Mason Transit Authority

790 E Johns Prairie Rd Shelton, WA 98584

Application for Employment

Equal access to programs, services and employment opportunities is available to all persons without regard to age, sex, (including pregnancy), marital status, sexual orientation, race, creed, color, national origin, honorably discharged veteran or military status, disability (sensory, mental, or physical), use of a trained guide dog or service animal, genetic information, victims of domestic violence, or any other basis protected by federal, state, and/or local law.

In accordance with the Americans with Disabilities Act and/or applicable state and local laws, applicants requiring reasonable accommodations for the application and/or interview process should notify the Human Resources Department. Examples of reasonable accommodations include making a change to the application process; providing written materials in an alternate format such as braille, large print, or audio recording; using a sign language interpreter; using specialized equipment; or modifying testing conditions.

Personal Information		
First Name *	Last Name *	Middle Name
Street Address *		
City *	State *	ZIP Code *
Email Address *	Phone Number (Home) *	Phone Number (Cell)
Position(s) applied for *	Referral Source	
Contact Information		
If necessary, best time to call you is:	Phone Number	
May we contact you at work? O_ Yes O_ No		
Best time to call you at work is:	Work Phone Number	Ext.
Employment Eligibility		
Date Available for Work		
If you are under 18 and it is required, can you furr O_ N/A O_ Yes O_ No	nish a work permit?	
If no, please explain:		
Have you submitted an application here before? O_ Yes O_ No		
If yes, give date(s) and position(s):		
Have you ever been employed here before? O_ Yes O_ No		
If yes, give dates: From:	То:	
Is this application a request for reemployment folloo _ Yes	owing an extended military leave of absence from	this company?
Are you lawfully authorized to work in the United O Yes O No	1 States?	



Employment Preferences		
Type of employment desired D Full-Time	D Part-Time D Temporary	D Seasonal
Will you relocate if job requires it? O_ Yes O_ No		
If they have been explained to you, are you able O_ N/A O_ Yes O_ No	e to meet the attendance r	requirements of the position?
Will you work overtime if required? O_ Yes O_ No		
If no, please explain:		
Reasonable Accommodation		
designed to elicit information about an applicant's di or whether accommodation is necessary. These issue	sability. Please do not provi es may be addressed at a lat	applying (with or without reasonable accommodation)? This question is not de information about the existence of a disability, particular accommodation, er stage to the extent permitted by law. essential functions" to respond.
Driver's license number and state required if driv	ring may be required in th	e job for which you are applying:
Employment History		
Starting with your most recent employer, provide	e the following information	n.
Employer		Phone Number
Street Address		
City		State
Dates Employed From:		To:
Starting Job Title		Final Job Title
Immediate supervisor and title (for most recent	position held)	
May we contact for reference? O_ Yes O_ No O_ Later		
Email Address	Phone Number	Ext.
Why did you leave?		
Summarize the type of work performed and join	b responsibilities:	



What did you like most about your position?				
What did you like least about your position?				
Employer		Phone Number		
Street Address				
City		State		
Dates Employed From:		То:		
Starting Job Title		Final Job Title		
Immediate supervisor and title (for most recent	position held)			
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Employer		Phone Number		
Street Address				
City		State		
Dates Employed From:		То:		
Starting Job Title		Final Job Title		
Immediate supervisor and title (for most recent	position held)			



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Employer		Phone Number	
Street Address			
City		State	
Dates Employed From:		То:	
Starting Job Title		Final Job Title	
Immediate supervisor and title (for most recent	position held)		
May we contact for reference? O_ Yes O_ No O_ Later			
Email Address	Phone Number		Ext.
Why did you leave?			
Summarize the type of work performed and join	b responsibilities:		
What did you like most about your position?			
What did you like least about your position?			
Explain if you have ever been fired or asked to	resign from a job?		



Explain any gaps in your employment, other that	n those due to personal illness, injury, or disability:	
Skills and Qualifications		
Summarize any special training, skills, languages, which you are applying:	licenses, bonding, certifications, and/or certificates that	may assist you in performing the position for
Computer Skills (include software titles and level of Skill Level	of experience, such as basic, intermediate, or advanced.)	
Skill Level		
Educational Background		
School Name	City & State	Level Completed
Major/Minor/Certificate		
School Name	City & State	Level Completed
Major/Minor/Certificate		
References		
Name	Title	Relationship to You
Number of Years Known	Phone Number	E-mail Address
Name	Title	Relationship to You
Number of Years Known	Phone Number	E-mail Address
Name	Title	Relationship to You
Number of Years Known	Phone Number	E-mail Address



Related Information

When answering these questions, please exclude any information that would reveal age, sex, (including pregnancy), marital status, sexual orientation, race,
creed, color, national origin, honorably discharged veteran or military status, disability (sensory, mental, or physical), use of a trained guide dog or service
animal, genetic information, victims of domestic violence, or other similarly protected status.

List special accomplishments, publications, awards, etc.:
Is there any other job-related information you want us to know about you?
Applicant Chaterrant and Cinnature
Applicant Statement and Signature
I certify that all information I have provided in order to apply for and secure work with the employer is true, complete, and correct.
l expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking, gathering, and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.
l understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.
I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.
If I am hired, I understand that I am free to resignat any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied or all or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.
l also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.
I understand that reasonable safeguards will be taken to protect all personal information provided or obtained in conjunction with this application for employment. My personal information may be shared with the employer's affiliate(s) and third parties engaged by the employer to perform services for the employer. Any personal information shared with an affiliate or third party is to be used solely to perform the services requested by the employer.
This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her age, sex, (including pregnancy), marital status, sexual orientation, race, creed, color, national origin, honorably discharged veteran or military status, disability (sensory, mental, or physical), use of a trained guide dog or service animal, genetic information, victims of domestic violence, or any other protected status under applicable federal, state, or local law.
I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.
ave you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which the you oplied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past twars? o_ Yes o_ No
Mason Transit Authority follows the requirements of the "Fair Chance Act," RCW 49. We will not inquire about prior arrests and convictions ntil after we determine an applicant is otherwise qualified for the position for which the applicant applied, except as allowed under RCW 9. There are specific exemptions for applicants working with children under 18 years of age, or vulnerable persons, certain financial institutions, law enforcement, and volunteers.
gnature of Applicant* Date Signed*