



Coast RTA

Waccamaw Regional Transportation Authority

1418 Third Avenue • Conway, SC 29526
 Phone: (843) 488-0865 • www.RideCoastRTA.com

Title of Position Applied for:

Today's Date:

APPLICANT INFORMATION

| | | |
|----------------|-----------------|------------------------|
| Last Name | First | M.I. |
| Street Address | | Apartment/ Unit # |
| City | State | Zip |
| Home Phone | Alternate Phone | E-mail Address |
| Date Available | Desired Salary | Social Security Number |

EMPLOYMENT INFORMATION

| | |
|--|---|
| Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> | If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Have you ever filed an application with Coast RTA? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Have you ever been employed by Coast RTA? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Have you ever been discharged, terminated or asked to resign from any position? If yes, please explain: | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Have you ever been convicted of any law violation (except a minor traffic violation; include misdemeanors, felonies, etc.)? If yes, please explain: | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Do you possess a valid Driver's License? License #: _____ State: _____ Class: _____ Expiration Date: _____ | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Do you possess a valid Commercial Drivers' License with passenger endorsement? License #: _____ State: _____ Class: _____ Expiration Date: _____ | YES <input type="checkbox"/> NO <input type="checkbox"/> |

EDUCATION

| Do you possess a High School Diploma or GED Certificate? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
|---|-----------------------------|---------------------|----------------|
| Name and Location of College, University or Vocational School | Major or Course of Study | Graduate? Y or N | Type of Degree |
| | | | |
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Coast RTA is an Equal Opportunity Employer

Rev. 03/09

EMPLOYMENT HISTORY (Please list most recent employers first)

| | | | |
|---|------------|-----------------|---------------|
| Company Name | | Supervisor | |
| Job Title | | Phone | |
| Address | | | |
| From (Mo/Yr) | To (Mo/Yr) | Starting Salary | Ending Salary |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Duties Performed: | | | |

EMPLOYMENT HISTORY

| | | | |
|---|------------|-----------------|---------------|
| Company Name | | Supervisor | |
| Job Title | | Phone | |
| Address | | | |
| From (Mo/Yr) | To (Mo/Yr) | Starting Salary | Ending Salary |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Duties Performed: | | | |

EMPLOYMENT HISTORY

| | | | |
|---|------------|-----------------|---------------|
| Company Name | | Supervisor | |
| Job Title | | Phone | |
| Address | | | |
| From (Mo/Yr) | To (Mo/Yr) | Starting Salary | Ending Salary |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Duties Performed: | | | |

MILITARY SERVICE

| | | |
|---|-------------------|----|
| Branch | From | To |
| Rank at Discharge | Type of Discharge | |
| If other than honorable, please explain | | |

SKILLS AND QUALIFICATIONS

Summarize special job skills, licenses and/or certificates you hold that are related to your qualifications for this position:

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AFFIDAVIT

If you are hired by The Coast RTA, a review of your background may be made. This review will reveal any misdemeanor and/or felony convictions. This investigation will be done through the State Law Enforcement Agency having Jurisdiction and F.B.I (Federal Bureau of Investigation) in Washington, D.C. Also, your accident and traffic record may be screened through the Department of Motor Vehicles in the state that you are currently licensed.

It is agreed and understood the employer or assigned agents may investigate the applicant's background to ascertain any and all information of concern to the applicant's record, whether same is of record or not, and applicant releases employers and persons named herein from all liability for any damages on account of their furnishing such information.

It is also agreed and understood that this application for employment in no way obligates the employer to employ the applicant.

I understand that any false answer, statements or implications made by me on this application or other required documents shall be considered sufficient grounds for denial of employment or discharge.

This certified that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature of Applicant

Date

Voluntary Affirmative Action Record

Applicants at The Coast RTA are considered for all positions, and employees are treated equally during employment without regard to race, color, religion, sex, national origin, age (40+), marital or veteran status, sexual orientation, or disability.

As an equal employment opportunity and affirmative action employer, The Coast RTA must comply with certain statistical record keeping and reporting requirements. This information is used solely for reporting and will be kept in a separate confidential file separate from your application for employment.

| | |
|---|--|
| Date | Position Applied For |
| Name | Phone |
| Address | |
| Referral Source: <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Current Coast RTA Employee <input type="checkbox"/> Other _____ | |
| Sex: | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Age: | <input type="checkbox"/> Under 40 years <input type="checkbox"/> 40 years or over |
| Ethnic Origin: | <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African-American <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White |