

## Application for Employment

**Note to Applicant: Please advise us in advance if you require an accommodation to complete this Application.**

FirstGroup America, Inc. (FGA) is an Equal Employment Opportunity employer. FirstGroup America, Inc. does not discriminate against any applicant or employee on the basis of race, color, sex, religion, national origin, age, disability, or any other consideration made unlawful by applicable federal, state, or local laws.

As a matter of policy and for the safety of the communities we serve, FirstGroup America, Inc. consistently applies background checking standards to all applicants. It is essential that all information requested, including educational background, work, criminal and residential history, be complete and accurate.

**Instructions:** Please type or print in black or blue ink. Answer all questions, checking all boxes that apply. Answer with "No" or "Not Applicable" (N/A) on questions that do not apply. Additional forms are available for each section if needed.

GENERAL INFORMATION			
Last Name	First	Middle	Date of Application
			/ /
<b>Present Address:</b> Street City County State Zip			

Last Name	First	Middle	Date of Application
			/ /
<b>Present Address:</b> Street City County State Zip			How long? (mo/ yr)
			/ /
Telephone Number and Area Code: Primary ( ) Secondary( )		Email address:	If hired, can you present evidence of your legal right to work in the US? Yes No

**List any other names that you have used in the past 10 years**

Name Used	City	County	State	From / To

**List all addresses for the past 10 years**

Street	City	County	State	Zip	How long? (mo/ yr)

Have you ever been fired or asked to resign by an Employer? Yes No			If yes, explain:			
What position are you applying for?			Minimum salary / wage requirement:			
How were you referred to our company?						
Banner	Flyer	Print Ad	On-line Ad	Radio/TV Ad	State Employment Agency	Job Fair
Community Organization		Our Website	Employee referral-Name:		Other:	
Have you ever worked for FirstGroup, First Student, First Transit, First Vehicle Services or Greyhound? Yes No			Where		When	
Have you ever applied to FirstGroup, First Student, First Transit, First Vehicle Services or Greyhound? Yes No			Where		When	
If hired, what date are you available to start work? / /		Would you accept employment in another city? Yes No If yes, where?		Are you applying for: Full-time Part-time		Are you able to work: Days Evenings Weekends

**FirstGroup America, Inc. is an Equal Opportunity Employer that values diversity**  
**Note: A pre-employment drug test is required for employment**

EDUCATIONAL BACKGROUND				
	Name and location of school or college	Circle highest grade completed	Did you graduate?	What was your degree and major?
Elementary and Junior High / Middle School		1 2 3 4 5 6 7 8		
High School and/or G.E.D.		9 10 11 12	Yes No	
College		1 2 3 4	Yes No	Degree: _____ Major: _____
Trade, Business, Correspondence or Graduate School		Degree / Certificate earned:	Yes No	Degree: _____ Major: _____

List any other training or educational programs of note:	
List any academic honors or other special recognition you have received:	
List any extracurricular activities and school offices of note:	

**EMPLOYMENT HISTORY**

All employment for the past 10 years must be noted below, including jobs held while in school or work in the military. Record your present or most recent position first and go back in chronological order. Resumes may not be substituted for any information requested, but may be submitted as an addendum to the completed application. Complete all questions for each position.

\* Massachusetts applicants may include any verified work performed on a volunteer basis.

<b>Employer name:</b>	<b>Dates employed (mo/yr):</b>		<b>Salary / pay rate:</b>	
	From: /	To: /	Beginning:	Ending:
<b>Employer address:</b>	<b>Employer phone #:</b>	<b>Supervisor's name &amp; title:</b>		
<b>Position(s) held:</b>	<b>Briefly explain your job duties &amp; responsibilities including supervisory experience:</b>			
<b>May we contact this employer?</b>	<b>Reason for leaving:</b>			
<b>EMPLOYMENT HISTORY</b>				

<b>Employer name:</b>	<b>Dates employed (mo/yr):</b>		<b>Salary / pay rate:</b>	
	From: /	To: /	Beginning:	Ending:
<b>Employer address:</b>	<b>Employer phone #:</b>	<b>Supervisor's name &amp; title:</b>		
<b>Position(s) held:</b>	<b>Briefly explain your job duties &amp; responsibilities including supervisory experience:</b>			
<b>May we contact this employer?</b>	<b>Reason for leaving:</b>			



<b>Mark appropriate box</b>	<b>Nature of conviction or pending charge</b>	
Misdemeanor		
Felony		
Pending Charge		
<b>Date of conviction MM / YYYY</b>	<b>Location of conviction or pending charge City, State</b>	<b>Name of court</b>
<b>Mark appropriate box</b>	<b>Nature of conviction or pending charge</b>	
Misdemeanor		
Felony		
Pending Charge		

<b>ADMINISTRATIVE SUPPORT APPLICANTS ONLY</b>			
<b>Type of experience</b>	<b>Length of experience</b>		<b>Length of experience</b>
AP / AR			Microsoft Excel
Multi-line phone system			Microsoft Word
Typing / keyboarding		WPM:	Microsoft Outlook
10-key calculator		Accuracy:	Microsoft PowerPoint
<b>List any other skills which are relevant for the position you seek:</b>			

<b>COMPUTER EXPERIENCE</b>		
<b>Software &amp; Hardware (PC or platforms)</b>	<b>Length of experience</b>	<b>Skill level (beginner, moderate, expert)</b>

<b>ADDITIONAL QUALIFICATIONS</b>
<b>Briefly summarize any additional qualifications you believe are important</b>

<b>APPLICANT'S STATEMENT AND RELEASE</b>
--

I certify that all statements made on this Application for Employment and in any subsequently executed questionnaire or employment document are true and correct. I understand that any material falsifications or omissions made on this application, or on any pre-employment document, may result in termination of my candidacy or any subsequent employment.

**If an employee relationship is established, I understand that such employment is terminable at will at any time, for any reason, with or without cause, and with or without notice. I also understand that any period of employment is not for any specific duration. In addition, I understand that no one is authorized to make oral exceptions to this policy, and written exceptions are permitted only when they are signed by the President of FirstGroup America, Inc. (the Company) or his or her designee.**

I authorize the Company and its representatives to conduct background evaluations and obtain information including but not limited to, criminal history checks from federal, state or local authorities, the Department of Transportation (DOT) and/or the Federal Transportation Administration (FTA).

I hereby expressly authorize such inquiries and fully release and discharge the Company and consumer reporting agency, their respective affiliates, subsidiaries, directors, officers, employees, agents and attorneys thereof, and each of them, and any individual, organization, entity, agency, or other source providing information to a consumer reporting agency from all claims and damages arising out of or relating to any investigation of my background for employment purposes. This release is valid for all federal, state, county and local agencies, authorities, previous employers, military services and educational institutions.

\*Note to Maryland Applicants: Initial \_\_\_\_\_ I UNDERSTAND THAT UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT OR CONTINUED EMPLOYMENT, THAT ANY INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

\*Note to Massachusetts' Applicants: Initial: \_\_\_\_\_ I understand that it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

\*Note to New York Applicants: Initial: \_\_\_\_\_ I have received a printed copy of the New York Correction Law; Article 23-A.

I acknowledge that any offer of employment is conditioned upon my taking a drug screen and the Company's receipt of satisfactory results of such a test and receipt of satisfactory background checks and, if necessary to determine ability to perform essential duties of the position offered, the satisfactory results of physical examination.

<b>Applicant Name:</b>		<b>Date:</b>	
<b>Applicant Signature:</b>			

**Note: This Application for Employment will be considered active for 90 calendar days**

INTERNAL USE ONLY			
<b>Individual receiving &amp; reviewing application:</b>	<b>Title:</b>	<b>Your location #:</b>	<b>Date:</b>

--	--	--

APPLICANT DISPOSITION:		
	<b>A. Applicant withdrew from process</b>	H. Conditional offer made
	B. Disclosure of a disqualifying event	I. Falsification of application
	C. Cannot work required hours	J. Failed reference / previous employment check
	D. Application reviewed—not selected	K. Failed pre-employment drug test / DOT physical
	E. Interviewed—not selected	L. Failed MVR check
	F. Failed pre-employment test or license requirement	M. Failed criminal background check
	G. Does not meet minimum age requirement	