

**EMPLOYEE APPLICATION**

Revised Oct 2004  
Applications kept for 6 months

**READY BUS LINE**  
**P.O. BOX 256**  
**1369 CTY 6**  
**LA CRESCENT, MN 55947**

Name in full \_\_\_\_\_ Phone # \_\_\_\_\_  
(First) (Middle) (Last)

Current address: \_\_\_\_\_ How long? \_\_\_\_\_  
(Number & Street) (City) (State & Zip Code)

List addresses for the past three years:  
\_\_\_\_\_  
(Number & Street) (City) (State & Zip Code) How long? \_\_\_\_\_  
\_\_\_\_\_  
(Number & Street) (City) (State & Zip Code) How long? \_\_\_\_\_  
\_\_\_\_\_  
(Number & Street) (City) (State & Zip Code) How long? \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Have you ever been convicted of a felony? Such conviction will not automatically bar you from employment. All circumstances will be considered. Please check one  Yes  No

Have you ever been denied a license, permit or privilege to operate a motor vehicle?  Yes  No

Has any license, permit or privilege ever been suspended or revoked?  Yes  No

Have you ever been disqualified subject to Section 391.15 of the Federal Motor Carrier Safety Regulations?  Yes  No

Do you hold a valid Driver's License:  Yes  No

Do you have a valid CDL:  Yes  No

Endorsements currently held:  Airbrakes  Passenger  School Bus

Driver's License #: \_\_\_\_\_ State in which License is held: \_\_\_\_\_

**Accident Record for the past three years:**

| Month / Year | Accident Type | Equipment Type | Death or Injuries | State | Night or Day | Employer |
|--------------|---------------|----------------|-------------------|-------|--------------|----------|
|              |               |                |                   |       |              |          |
|              |               |                |                   |       |              |          |
|              |               |                |                   |       |              |          |

**Traffic Convictions & Forfeitures for the past three years (other than parking violations):**

| Location | Date | Charge | Penalty |
|----------|------|--------|---------|
|          |      |        |         |
|          |      |        |         |
|          |      |        |         |

**Education:**

| Schools               | Name of School | Address | Graduate or Degree? |
|-----------------------|----------------|---------|---------------------|
| Grade School          |                |         |                     |
| High School           |                |         |                     |
| College or University |                |         |                     |
| Business or Technical |                |         |                     |

**Employment History:**

*\*Provide a complete list of employment for the past 3 years if you do not hold a CDL.*

*\*Provide a complete list of employment for the past 10 years if you hold a CDL.*

| Employers<br>(List most recent first) | Address | Position | Employed<br>FROM TO | Salary | Reason for<br>Leaving |
|---------------------------------------|---------|----------|---------------------|--------|-----------------------|
|                                       |         |          |                     |        |                       |
|                                       |         |          |                     |        |                       |
|                                       |         |          |                     |        |                       |
|                                       |         |          |                     |        |                       |
|                                       |         |          |                     |        |                       |

**Driving Experience:**

| Type of Vehicle | State in which experience was gained | Dates From | Dates To | Approx # of Miles (total driven) |
|-----------------|--------------------------------------|------------|----------|----------------------------------|
|                 |                                      |            |          |                                  |
|                 |                                      |            |          |                                  |
|                 |                                      |            |          |                                  |
|                 |                                      |            |          |                                  |

Do you have a current DOT Med Card?     Yes     No  
Expiration date: \_\_\_\_\_

Have you ever been granted a waiver under Section 391.49 of the Federal Motor Carrier Safety Regulations pertaining to the loss of foot, leg, hand or arm?     Yes     No

Have you ever tested positive for a controlled substance at a place of your employment or at a business you have applied at in the last two years?     Yes     No

Have you ever had a alcohol test with a Breath Alcohol Concentration of 0.04 or greater at a place of your employment or at a business you applied at in the last two years?     Yes     No

Have you ever refused a required test for drugs or alcohol at a place of your employment or at a business you have applied at in the last two years?     Yes     No

**AGREEMENT –TO BE READ & SIGNED BY APPLICANT**

It is agreed and understood that the employer or his/her agents may investigate the applicant’s background to ascertain any and all information of concern to applicant’s record, whether same is of record or not. I understand that the information in this Application will be used, and that prior employers may be contacted for purposes of investigation as required by Section 391.23 of the Federal Motor Carrier Safety Regulations. This applicant understands that an offer of employment is conditional upon additional information and completion of such examinations as may be required to complete employment as a driver for this company.

I do hereby request & authorize this company, any person(s), each former employer, or any firm or corporation referred to in this Application to give any information or answer all questions asked concerning my work or moral character in connection with this application & release from liability or responsibility all persons, companies or corporations requesting or supplying such information. I further agree that any false statements will disqualify me for employment or cause my subsequent dismissal & that acceptance does not bind either party to a specific period of employment.

This certifies that I completed this Application, and that all entries on it & information in it are true & complete to the best of my knowledge.

**Applicant’s Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**FAIR CREDIT REPORTING ACT DISCLOSURE STATEMENT**

In accordance with the provisions of Section 604 (b)(2)(A) of the Fair Credit Reporting Act, Public Law 91-508, as amended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter I, of Public Law 104-128), you are being informed that reports verifying your previous employment, previous drug & alcohol test results, and your driving record may be obtained on you for employment purposes. These reports are required by Sections 382.413, 391.23, and 391.25 of the Federal Motor Carrier Safety Regulations.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Printed Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

**IMPORTANT NOTICE TO JOB APPLICANTS**

Ready Bus Line/R.B.L. WI, Inc. hires only United States citizens and aliens lawfully authorized to work in the United States.

In the event you are offered a position with Ready Bus Line/R.B.L. WI, Inc. you will as a condition of employment, be required to complete and sign an INS Form I-9 at the time of hire. At your time of hire you will also be required to present original documentation that both identifies and establishes your work authorization. Failure to timely do either or both of these may result in termination or any employment with Ready Bus Line/R.B.L. WI, Inc., without prejudice to future application. This applies to U.S. citizens as well as aliens.

For many persons the presentation of a Social Security card along with either a picture Driver's License or State Identification card will be sufficient documentation of identity and work authorization. However, certain documents will also be acceptable. If you wish to know a complete list of acceptable documents, please inquire to the person with whom you are applying by returning this form with this sentence circled. This list can also be obtained from the nearest office of the Immigration and Naturalization Service.

If there are any special circumstances why you believe you should be exempt from any part of the verification procedure, please inform Ready Bus Line/R.B.L. WI, Inc. representative at the time verification is requested. Nothing contained herein should be construed by you to be an offer of employment of any nature.

I have read and understand the above notice to job applicants.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_