### MINIMUM HIRING STANDARDS SAFETY SENSITIVE POSITIONS\*

Thank you for your interest in employment with Transit Management of Abilene, Inc.-CityLink is an Equal Opportunity Employer that welcomes your application.

If an offer of employment is made to you, it will be contingent upon satisfactory results obtained from a pre-employment background review. This review includes but may not be limited to:

- Motor Vehicle Record(s)
- Criminal History
- Drug Testing
- Federal Transportation Administration (FTA) / Department of Transportation (DOT) required physical examination(s)
- Prior Employment History

# Please note that any falsification or omissions in information provided on any pre-employment document may result in disqualification from the hiring process.

What follows is general employment criteria considered by CityLink for all Safety Sensitive Positions.

### General

- High School Diploma or Equivalent (preferred, but not mandatory for non-management positions)
- At least 21 years of age. This requirement does not apply to select maintenance technician positions

### **Employment and Background**

- Verification of the last seven (7) years of residency, and ten (10) years of employment
- Explanation for any gap in employment exceeding thirty (30) calendar days

### **Motor Vehicle Record**

- A valid driver's license in the state in which you reside
- A minimum of three (3) years of driving experience
- No more than two (2) moving violations within the past thirty-six (36) months
- No more than (2) accidents (verified by corresponding violation or points associated with accident) within the past thirty-six (36) months
- The ability to obtain a Commercial Drivers License (CDL) as required by the position

### **Criminal Conviction History\*\***

Criminal conviction(s) involving one of the following may potentially disqualify you from employment opportunities with CityLink:

- Any crime against a child or vulnerable adult (i.e. disabled, elderly or infirmed)
- Kidnapping / Abduction
- Murder / Manslaughter / Attempted Murder / Vehicular Homicide
- The possession, manufacture, cultivation, use or distribution of illegal substances or associated paraphernalia
- The unlawful use, possession, distribution, disposal or alteration of a firearm or weapon
- Any act of violence upon another individual
- Theft, dishonesty
- Any offense of a sexual or indecent nature including but not limited to the unlawful possession of publications and images, and/or
  downloading of such images for the managing and assessing of any website containing unlawful sexual content
- Driving Under the Influence (DUI) or Driving While Intoxicated (DWI)

### **Drug Testing**

• Applicants must pass a pre-employment drug screen

### FTA and DOT Requirements

- The ability to pass an FTA/DOT mandated physical examination or an approved state-specific physical for non-DOT driving positions
- The willingness to comply with FTA/DOT substance abuse regulations and testing requirements outlined in CFR 665 and CFR part 40

\*Safety Sensitive Positions include; dispatchers, drivers/operators, maintenance technicians, field management/supervisors, and utility personnel

Please note that in some instances additional minimum hiring standards may be required due to State and/or Federal regulations.

<sup>\*\*</sup>Criminal history information should not be disclosed or discussed until after the initial interview process (or after the contingent offer of employment in Newark NJ and Hawaii); however, the general guidelines outlined in this document still apply. The Company will consider for employment qualified applicants with criminal histories in a manner consistent with San Francisco Police Code Art. 49, §§ 4901-4920.



# **Application for Employment**

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

We are an Equal Employment Opportunity employer. We do 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, we consistently applies background checking standards to all applicants. It is essential that <u>all</u> 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.

Date: / /

		GENERAL IN	IFORM/	ATION			
Last Name		First				Middle	
Present Address: Street	City	Co	County State Zip How Ion			How long? (	mo/ yr)
<b>Telephone Number and Area Code:</b> Primary ( )	Date of	Birth /	Social S	Security Number:		If hired, can you present evidence of your legal right to work in the US? ☐ Yes ☐ No	
Li	ist any other r	names that you	have us	ed in the past 10	years		
Name Used		City		County	State	ı	From / To
	List	t all addresses	for the p	ast 7 years			
Street		City		County	State	Zip	How long? (mo/yr)
Have you ever been fired or asked to r employer?  Yes □ No □	esign by an	If yes, explain:					
1							
What position are you applying for?		Minimum salary	_	•			
How were you referred to our company?	☐ Community			e Ad □Radio/TV Ac oyee referral-Name:	d	Employment A	lgency □Job Fair □Other
Have you ever worked for us previousl Yes No	y?	In what capacit	ty?			When?	
If hired, what date are you available to start work? / /	Are you apply	ying for:	Full-tir	me		Are you able Days E	Evenings
Provious Military Service: Ves	No						

		EDUCATIONAL	BACKGR	DUND		
	Name and location of school or college	Circle highest grad completed		you uate?	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 1	2   Y			
College		1 2 3 4	□ Ye	)	Degree Major	
Trade, Business, Correspondence or Graduate School		Degree / Certifica earned:	ate □Ye	)	Degree	
List any other trainin	g or educational programs of note:					
you have received: List any extracurricu	onors or other special recognition					
note:						
		EMPLOYMEI	NT HISTO	RY		
recent position first		Resumes may not be	substituted		e in the military. Record your present or most rmation requested, but may be submitted as an	
Employer name:		Dates employed (me	o/yr):	Sala	ary / pay rate:	
		From: /	To: /	Begi	inning: Ending:	
Employer address:			Employer	hone #:	Supervisor's name & title:	
Position(s) held:		Briefly explain your	job duties &	k responsib	bilities including supervisory experience:	
May we contact thi	s employer?	Reason for leaving:				
☐ Yes ☐ N	No					
Employer name:		Dates employed (me			ary / pay rate:	
		From: /	To: /	Begi	inning: Ending:	
Employer address:			Employer	hone #:	Supervisor's name & title:	
Position(s) held:		Briefly explain your	ioh duties 8	roenoneih	hilities including supervisory experience:	

May we contact this employer?

□No

May we contact this employer?

□No

☐ Yes

☐ Yes

Employer name:

Employer address:

Position(s) held:

Employer phone #:

Reason for leaving:

Reason for leaving:

From:

Dates employed (mo/yr):

Salary / pay rate: Beginning:

Briefly explain your job duties & responsibilities including supervisory experience:

Ending:

Supervisor's name & title:

## **EMPLOYMENT HISTORY**

All employment for the past 10 years must be noted below, including jobs held while in school or while 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.

Employer name:	Dates employed (mo/yr): Salary / pay rate:				
	From: /	To: /	Beginr	ning:	Ending:
Employer address:		Employer phone #:		Supervisor's name & title:	
Position(s) held:	Briefly explain your	Briefly explain your job duties & responsibilities including supervisory experience			visory experience:
May we contact this employer?	Reason for leaving				
Yes No					
				<del>,                                      </del>	
Employer name:	Dates employed (m			/ pay rate:	T = ::
	From: /	To: /	Beginr		Ending:
Employer address:		Employer phone	#:	Supervisor's name	& title:
Position(s) held:	Briefly explain your	r job duties & resp	onsibil	ities including super	visory experience:
May we contact this employer?	Reason for leaving:				
Yes No					
Employer name:	Dates employed (m	o/yr):	Salary / pay rate:		
	From: /	To: /	Beginr	ning:	Ending:
Employer address:		Employer phone	#:	Supervisor's name	& title:
Position(s) held:	Briefly explain your	r job duties & resp	onsibil	ities including super	visory experience:
May we contact this employer?	Reason for leaving				
Yes No					

IDENTIFY AND	EXPLAIN AN	Y EMPLOYMENT	GAPS, OR PERIODS OF	F UNEMPLOYMENT OF 30	DAYS OR LONGER	
Dates:		Reason:				
From:	То:					
		CRIMII	NAL CONVICTION HI	STORY		
reasons, all applicants includes any conviction	must provide a n and/or crimin lify an applicar	a complete adult cr hal charge where that the from employment	iminal conviction record e final disposition is still	pending. Please note that a	e transport. For these mandated restrictions. This a criminal conviction history will ne violation as it relates to the	
Date of conviction MM / YYYY		Location of convicti City, State	on or pending charge	Name of court		
/		ony, orace				
Mark appropriate box		Nature of conviction	n or pending charge			
<ul><li>☐ Misdemeanor</li><li>☐ Felony</li></ul>						
Pending Charge						
Date of conviction		Location of convicti	on or pending charge			
MM / YYYY		City, State		Name of court		
/		N. a. a. i. d.				
Mark appropriate box  Misdemeanor		Nature of conviction	n or pending charge			
Felony						
Pending Charge						
Date of conviction			on or pending charge	Name of court		
MM / YYYY /		City, State				
Mark appropriate box		Nature of conviction	n or pending charge			
<ul><li>☐ Misdemeanor</li><li>☐ Felony</li><li>☐ Pending Charge</li></ul>						
		LI	CENSE INFORMATION	ON		
B. Has any licer C. Have you ev	nse, permit or pri er been disqualif	a license, permit or pri vilege ever been susp fied subject to Part 39	vilege to operate a motor ve	ehicle?	Yes No Yes No Yes No Yes No	
If "YES" to any of the al	bove, explain:					
How many years of drivi	ing experience	do you have?		Less than 3 years	3 years or more	
State		License #		Туре	Expiration date	
TRAFFIC CITATION	IS / CONVIC	TIONS & FORFE	ITURES FOR THE PA	AST 3 YEARS (other tha	n parking violations)	
	Location		Date	Charge	Penalty	

	TECHNICIAN / MECHAN	IIC APPLICANTS ONLY	
Type of experience	Length of experience	Type of experience Length of experience	
Engine tune-up; Diesel		Air Brakes / Steering	
Engine tune-up; Gas		Brakes / Steering	
Electrical Systems		Lubrication	
Clutch & Transmission-Truck		Tire repair	
Inspection License Class		Do you own your own shop tools?	Yes No
List current ASE's:			
Describe your diagnostic experience:			
List any other skills which are relevant to the position you seek:			

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

	COMPUTER EXPERIENCE	
Software & Hardware (PC or Platforms)	Length of experience	Skill level (expert, moderate, beginner)

## **ADDITIONAL QUALIFICATIONS**

Briefly summarize any additional qualifications you believe are important

### **APPLICANT'S STATEMENT AND RELEASE**

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.

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.

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.

Applicant Name:	Date:	
Applicant Signature:		

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

	INTERNAL USE ONLY	
Individual receiving & reviewing application:	Title:	Date:

### CityLink 1189 S 2<sup>nd</sup> St. Abilene, Texas 79602 325-676-6399 Office 325-676-6407 Fax

### PART I – INVESTIGATIVE CONSUMER REPORT DISCLOSURE AND CONSENT

In connection with your employment or application for employment (including contract for services), an investigative consumer report and/or consumer reports, which may contain public record information, may be requested from a consumer reporting agency. These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, academic history, professional credentials, drugs/alcohol use, information relating to your character, general reputation, educational background, personal characteristics, mode of living, or any other information about you which may reflect upon your potential for employment (or contract for services) gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information. Such reports may contain public record information concerning your driving record, workers' compensation claims, criminal records, etc., from federal, state and other agencies which maintain such records; as well as information from the consumer reporting agency concerning previous driving record requests made by others from such state agencies. If you are hired or engaged or remain employed or engaged, additional reports may be requested to update, renew or extend your employment or contract, to the extent permitted by law.

You have the right to receive, upon your written request within a reasonable period of time, (not to exceed 30 days) a complete and accurate disclosure of the nature and scope of any investigation requested. You have the right to make a request to the consumer reporting agency, upon proper identification, to request the nature and substance of all information in its files on you at the time of your request, including the sources of information, and the recipients of any reports on you that the consumer reporting agency has previously furnished within the two-year period preceding your request. The company's current consumer reporting agency is Trak-1, who may be contacted by mail at 7131 Riverside Parkway, Tulsa, Oklahoma, 74136, or by phone at (800) 600-8999. The company reserves the right to change consumer reporting agencies at any time. Additionally, the company may be required by its customers to, which you are assigned, to provide the reports to them. The customers may be required to provide the reports to other organizations in accordance with the law. By your signature below, you consent to such sharing of the reports.

assigned, to provide the reports to them. The customers may be required to provide the reports to other organizations accordance with the law. By your signature below, you consent to such sharing of the reports.
<ul> <li>☐ Oklahoma Applicants Only: I request a copy of any <i>credit</i> report requested on me.</li> <li>☐ Minnesota Applicants Only: I request a copy of any consumer report requested on me.</li> </ul>
Notice to California Applicants: Under section 1786.22 of the California Civil Code, you may view the file maintained on you by the consumer reporting agency during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at the agency in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.  † I request to receive a free copy of any consumer report ordered on me by checking this box. (California Applicants Only)

I authorize Trak-1 or any other consumer reporting agency, to prepare consumer reports or investigative consumer reports about me for employment-related purposes. The consumer reporting agency is authorized to disclose all information obtained to the requesting entity for the purpose of making a determination as to my eligibility for employment, promotion or any other lawful purpose. If hired or contracted, this authorization shall remain on file and shall serve as ongoing authorization for the procurement of consumer reports at any time during my employment or contract period. I have been provided a copy of the summary of the rights of the consumer pursuant to the Fair Credit Reporting Act (FCRA).

	nave read and fully understand this disclosure to have those questions answered to my sa	
Print Name:	Signature:	Date:
Social Security No:	Date of Birth:	Sex: ☐Male ☐Female

# DPS Computerized Criminal History (CCH) Verification

(AGENCY COPY)

, acknowledge that a Computerized Criminal

Signature of Applicant or Employee	Please: Check and Initial each Applicable Space  CCH Report Printed:  YES NO initial  Purpose of CCH:  Empl Vol/Contractor initial  Date Printed: initial  Destroyed Date: initial
Signature of Applicant or Employee  Date  Transit Management of Abilene, Inc. (CityLink Transit) Agency Name (Please print)  Agency Representative Name (Please print)	Please: Check and Initial each Applicable Space  CCH Report Printed:  YES NO initial  Purpose of CCH:  Empl Vol/Contractor initial
Signature of Applicant or Employee  Date  Transit Management of Abilene, Inc. (CityLink Transit)  Agency Name (Please print)	Please: Check and Initial each Applicable Space  CCH Report Printed:  YES NO initial  Purpose of CCH:
Signature of Applicant or Employee  Date  Transit Management of Abilene, Inc. (CityLink Transit)	Please: Check and Initial each Applicable Space  CCH Report Printed:  YES NO initial
Signature of Applicant or Employee  Date  Transit Management of Abilene, Inc. (CityLink Transit)	Please: Check and Initial each Applicable Space CCH Report Printed:
Signature of Applicant or Employee  Date	Please: Check and Initial each Applicable Space
Signature of Applicant or Employee	Please: Check and Initial each Applicable Space
(This copy must remain on file by your agen	cy. Required for future DPS Audits)
(This convenuet romain on file by your agen	ov Doquired for future DDC Audital
the fingerprinting services company.	agency fisted below, and pay a fee of \$24.75 to
complete set of fingerprints, request a copy be sent to the	
Personal Criminal History or by calling the DPS Program	
Services of Texas (FAST) as instructed online at www	
In order to complete the process I must make a	
fingerprint criminal history record may be discussed with	
the result of the name and DOB search. Once this	
agency may request that I have a fingerprint search per	
not allowed to discuss with me any criminal history reco	
Name-based information is not an exact search true identification to criminal history, therefore the organ	
411; Subchapter F.	and an experience of the control of
	data may be found in Texas Government Code
for this agency to access an individual's criminal history	
Website and will be based on <u>name and DOB</u> identifiers of this agency to access an individual's criminal history	
History (CCH) check will be performed by accessing to Website and will be based on name and DOB identifiers for this agency to access an individual's criminal history.	

Date

Rev. 09/2013