



Application for Non-Commercial Driving Employment

Burlington Trailways 906 Broadway Street West Burlington Iowa 52655

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization. Please fill in every blank on the application if N/A put N/A.

Please Print

Applicant name: _____ Date: _____
Last First Middle

Address: _____
Street City State ZIP Code

Telephone #: () _____ Cell phone or other phone #() _____ Email: _____

Best Time to call: _____ May we contact you at work: _____
Yes No best time to call

Type of employment desired: _____ full-time _____ part-time _____ temporary

Position(s) applied for or type of work desired: _____

Date you will be available to start work: _____

Desired Salary or hourly rate of pay: \$ _____ Per _____

Have you ever submitted an application here before? _____ Yes _____ No

If yes give dates and positions _____

Are you able to meet the attendance requirements? _____ Yes _____ No

Do you have any objection to working overtime if necessary? _____ Yes _____ No

Can you travel if required by this position? _____ Yes _____ No

Have you ever been previously employed by our organization? _____ Yes _____ No

If yes give dates: From: ____ / ____ / ____ To: ____ / ____ / ____

Can you submit proof of legal employment authorization and identity? _____ Yes _____ No

If you are under 18, can you furnish a work permit if it is required? _____ Yes _____ No

Have you ever been convicted of a crime in the last 7 years? _____ Yes _____ No

If yes, please explain (a conviction will not automatically bar employment): _____

Have you ever entered into an agreement with any former employer or other person that may restrict your ability to work for our company? (non-compete agreement) _____ Yes _____ No

If yes please explain: _____

Driver's license number (if driving is an essential job duty): _____

How were you referred to us? _____

Employment History

Please provide all employment information for your past four employers starting with the most recent.

Employer: _____ **Position held:** _____

Address: _____ **Telephone #:** _____
Street City State Zip Code

Immediate supervisor and title: _____

Dates employed: from _____ to _____ **Starting Salary:** _____ **Ending:** _____

Starting title: _____ **Ending title:** _____

Job summary: _____

Reason for leaving: _____

Employer: _____ **Position held:** _____

Address: _____ **Telephone #:** _____
Street City State Zip Code

Immediate supervisor and title: _____

Dates employed: from _____ to _____ **Starting Salary:** _____ **Ending:** _____

Starting title: _____ **Ending title:** _____

Job summary: _____

Reason for leaving: _____

Employer: _____ **Position held:** _____

Address: _____ **Telephone #:** _____
Street City State Zip Code

Immediate supervisor and title: _____

Dates employed: from _____ to _____ **Starting Salary:** _____ **Ending:** _____

Starting title: _____ **Ending title:** _____

Job summary: _____

Reason for leaving: _____

Employment History continued

Employer: _____ Position held: _____

Address: _____ Telephone #: _____
Street City State Zip Code

Immediate supervisor and title: _____

Dates employed: from _____ to _____ Starting Salary: _____ Ending: _____

Starting title: _____ Ending title: _____

Job summary: _____

Reason for leaving: _____

Have you ever been fired or asked to resign from a job? _____ Yes _____ No

If yes please explain: _____

Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

Educational History

List school name and location, years completed, course of study, and any degrees earned:

Name of School and Address:	# of Years Attended:	Course/Major	Earned Degree
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References

List 3 references' names, telephone numbers, and years known (do not include relatives or employers):

Name:	Title:	Relationship to you:	Telephone #	# of years known
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Is there any other information that would help describe any special skills or additional qualifications that you have:

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____ Date: _____

HireRight
DAC Trucking
Fax 800-267-4093 (Manual Service)

HireRight Customer:
Company Name: Burlington Trailways
Company Contact Name: Bob Hoxie
Fax 800-257-8069 (Database Retrieval)

Fax # 319-753-2916
HireRight Customer #: 22333

PART II- CONSUMER REPORT AND INVESTIGATIVE CONSUMER REPORT DISCLOSURE (FOR EMPLOYMENT PURPOSES)

In connection with your employment or application for employment (including contract for services) and in accordance with applicable laws, HireRight may obtain or assemble consumer reports and /or investigative consumer reports (collectively, "Reports") which may include information about you related to: previous employment (including employers, dates of employment, salary information, reasons for termination, ect.), safety performance including accident history and inspection history, academic history, verification of references and other information supplied by applicant, professional credentials, drug/alcohol use in violation of law and/or company policy, driving record, workers' compensation claims, credit history, creditworthiness, credit capacity, bankruptcy filings, criminal history records, information about your character, general reputation, personal characteristics and mode of living (collectively, "Information"). Information may be obtained from government agencies, educational institutions, HireRight clients, personal references, personal interviews and other information suppliers (collectively, "Suppliers").

Upon providing proper identification and complying with any applicable legal requirements, you have the right to request the nature and substance of all information in HireRight's files pertaining to you at the time of your request, including but not limited to: (i) whether any Reports have been provided by HireRight to other parties; (ii) identification of any Suppliers utilized by HireRight in compiling such Reports; and (iii) identification of any recipients of Reports furnished by HireRight within the two (2) year period preceding your request. HireRight may be contacted by mail at P.O. Box 33181, Tulsa, Oklahoma, 74153, or by phone at (800) 381-0645.

☐ Check this box if you are applying for employment in California and/or you are a California resident and, in either case, you wish to receive a copy of your credit report or investigative consumer report if one is obtained or assembled by HireRight. Pursuant to the California Civil Code, you may view the file maintained on you by HireRight during normal business hours. You may also obtain a copy of this file by submitting proper identification and paying applicable costs for such file, if required by law, by contacting HireRight in person or by mail. HireRight is required to have personnel available to explain your file to you and 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.

☐ Check this box if you are applying for employment in Oklahoma and/or you are an Oklahoma resident and, in either case, you wish to receive a copy of your consumer report if one is obtained or assembled by HireRight.

☐ Check this box if you are applying for employment in Minnesota and/or you are a Minnesota resident and, in either case, you wish to receive a copy of your consumer report if one is obtained or assembled by HireRight.

PART II- AUTHORIZATION FOR RELEASE OF INFORMATION (FOR EMPLOYMENT PURPOSES)

I hereby authorize HireRight to receive information and disclose such information to its customers for the purpose of making a determination as to my eligibility for employment, promotion, retention or other lawful purpose. If hired or contracted, I authorize HireRight and the HireRight customer named above ("Customer") to retain this document on file to act as ongoing authorization for the procurement and possession of Reports at any time during my employment or contract period. I fully release HireRight and Suppliers from all claims of damages related to the investigation of my background and provision of information as set forth in this disclosure and authorization. I agree that information in HireRight's possession and my employment history with Customer if I am hired, may be supplied by HireRight to other HireRight customers for legally permissible purposes; provided, such information will not include the Drug and Alcohol information set forth in Part I above, unless I have given a separate specific consent for HireRight to share such information.

By signing below, I certify that: (i) all information provided herein is complete and accurate; (ii) I have read and fully understand this Part II disclosure and authorization for release as well as the attached FMCSA Notification of Driver Rights and any applicable state law notices; (iii) prior to signing I was given an opportunity to ask questions and to have those questions answered to my satisfaction; (iv) I execute this authorization voluntarily and with the knowledge that the information obtained pursuant to this authorization could affect my eligibility for employment, promotion, retention or other lawful purpose; (v) I understand I may review this document with legal counsel prior to signing; (vi) I authorize HireRight and any person or entity contacted by HireRight to furnish the above-mentioned information; and (vii) facsimile or photographic copies of this authorization are as valid as an original.

NOTE- THIS AUTHORIZATION DOES NOT APPLY TO DRUG & ALCOHOL INFO. ADDRESSED IN PART I.

Print Name: _____ Social Security Number: _____ Date of Birth: _____

Applicant Signature: _____ Date: _____

Important- please read carefully before signing.

Public law requires us to inform you that a routine inquiry may be made during processing of this application through a consumer reporting agency as to your characteristics and mode of living. Information as to the nature and scope of this inquiry will be provided upon written request.

Applicants accepted for employment are hereby notified that employment and compensation or benefits can be changed or terminated with or without cause, and without notice at any time at the option of either the Company or employee. No representative of the Company other than the Chief Executive Officer of Burlington Trailways has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

It is further understood that employment will be contingent upon successfully passing a pre employment physical examination and a drug screen as determined by the employer.

I authorize educational institutions, employers, law enforcement authorities, organizations and individuals having relevant information concerning me to release such information and I release all concerned from any liability in connection therewith.

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

I certify 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.

Date: _____

Applicant's Signature: _____

BURLINGTON TRAILWAYS AUTHORIZATION TO VERIFY INFORMATION.

For an applicant to be considered for employment they must be truthful on their application. Burlington Trailways may run all prospective applicants thru Courts Online to determine if there are any convictions in the Court System that the applicant failed to divulge on the application and/or background information form. If an applicant is found to have convictions after indicating on the application they have no convictions and or failed to put on the background information form convictions this may invalidate the application and or terminate employment if employed whenever it may be discovered. If the applicant feels that the convictions are not valid then the applicant will need to contact the Court System in which the conviction is posted to have their records checked and if needed corrected. The application will be suspended and retained for the one year retention period. If the applicant is able to receive a retraction from the court stating that the conviction was not from that of the applicant or was a clerical error and should not have been a conviction the application will be reinstated and the applicant may once again be considered for employment. Again the application will be retained for the 1 year retention period.

If the applicant is found to have no additional convictions other than any convictions listed on the application then the applicant may at the discretion of Burlington Trailways move to the next step of the hiring process. All non driver applications will be run thru DAC services/Hire Rite or other background service used by Burlington Trailways for a complete background check to include SSN trace, criminal history check and if applicable drivers license check. All driver Applicants will be run thru DAC services/Hire Rite or other background service that Burlington Trailways is currently using for driver applicants for their MVR and other applicable checks for drivers.

Applicants who pass the background checks may be eligible for employment. An Applicant does not have to be conviction free, however if there are convictions they need to be forthcoming so as not to appear to be trying to hide information.

I _____ agree that Burlington Trailways may check my Court
Printed Name

records and further understand that failure to disclose information may invalidate my application. I have received the Summary of Your Rights under the Fair Credit Reporting Act. I release Burlington Stage Lines Ltd. dba Burlington Trailways from any liability and responsibility for obtaining and verifying information from the Courts, and or any other means of verifying my application or information provided to Burlington Trailways.

Signature of applicant

SSN

Date of Birth