JOB APPLICATION Santa Cruz County Regional Transportation Commission

| | 1 | (SCCRT An Equal Opportunit | * | | |
|---|--|--|--|---------------------------|----------------------|
| | Please reurn this application co | - | | | |
| . Position (s) Applied For: | Persons unde | r age 18 must be able to p | oduce a valid work permit | : | |
| 2. Last Name: | | | First: | | Middle Initial: |
| 3. Mailing Address: | | | City, State and Zi | p Code | |
| l. Daytime Telephone: | | | Home Telephone: | | Alternate Number: |
| . E-Mail Address: | | | Social Security Number: Date of Birth | | Date of Birth |
| 6. How did you learn about this jo | ob (specify): | | • | | |
| | | | | | |
| 7. Are you able to produce docun 8. Are you currently an SCCRTC 9. Have you ever been employed if yes, indicate | Employee? by SCCRTC? | o work in the United | | ☐ Yes ☐ Yes ☐ Yes ☐ tion: | □ No □ No □ No |
| 10. Do you have any relatives em (There may be limitations on the Husband, and Child. Each case is Name: | employment of Father, Mot s considered separately for | her, Brother, Sister, V potential conflict of i Relationship y) | Vife, Domestic Partne nterest.) | | mployment? |
| Hours Worked: | Full Time | | Part Time On C | Call | |
| 13. Have you ever been convicted If yes, indicate. This information Date: | n will be reviewed for job re ou have no second language riate letter code in the box co | , skip this question. | ional sheet of paper if Charge: Action Taken: Please indicate your le | | e following |
| | Letter Codes: | 2= I can car | ry on a conversation a ry on a conversation f derstand but cannot ca | reely but cannot i | read/write. |
| Enter appropriate code below | Spanish Ilocano | ☐ Tagalog ☐ Korean | | namese er (Specify) | |
| | | | | | |
| 15. EDUCATION AND TRAIN Provide information for education Colleges, Vocational or Technica | on as it relates to the position | on for which you are | applying. Major Subject Unit | s Type De | egree/Certificate |
| | | | | | |
| | | | | | |
| Licenses and Certificates (State, Description | Professional, Nursing, Trad | de, etc. which are req Issued By | uired for this position Number | n. Expirati | on Date |

| 16. EMPLOYMENT HISTOR Begin with your present or mos | | g on-the-job training, volunteer work and military experience. Please be |
|---|--|---|
| duties of the position for which substitute for the application or | you are applying. You may use additional s | which demonstrate that you have the knowledge and skills to perform the heets to complete your work history. A resume may be attached but is not a N MUST BE COMPLETED. If a response to a supplemental questionnaire by be returned. |
| | | |
| Date and Salary Informa | | |
| From: | Employer: | |
| To: | Address: | |
| Telephone | Supervisor's Name: | |
| Monthly Salary: \$ | Supervisor's Title: | |
| Hours Per Week: | Job Title | |
| | Job Duties | |
| Reason For Leaving: | | |
| | | |
| | | |
| | | Occupation and Description of Duties |
| Date and Salary Informa From: | tion Employer Information Employer: | Georgian and Best-tiphon of Buttes |
| То: | Address: | |
| | Supervisor's Name: | |
| Telephone Monthly Salary: \$ | Supervisor's Title: | |
| Hours Per Week: | Job Title | |
| Hours Fer Week. | | |
| | Job Duties | |
| Reason For Leaving: | | |
| | | |
| | • | |
| | | |
| Attach sheet for additional emp | loyement information | |
| | | |
| | | |
| | | |
| I hereby certify that all informa application may lead to termina | | my knowledge and understand that falsification of information on this |
| Signature of applicant: | | Date: |

Santa Cruz County Regional Transportation Commission Equal Employment Opportunity Information Self Identification

To assist the Santa Cruz County Regional Transportation Commission (SCCRTC) in maintaining accurate employment records and comply with federal government reporting requirements, your assistance is requested. The information you provide (below) is considered entirely voluntary and confidential, and will be used only for data reporting requirements. If you choose not to self-identify, your employment status will not be affected in any way.

| your employment status will not be affected in any way. |
|---|
| The SCCRTC is an Equal Employment Opportunity employer. We conduct all employment-related activities without regard to race, color, religion, gender, gender identity, marital status, age, disability, veteran status, sexual orientation, national origin, or other classification protected by applicable State or Federal employment discrimination laws. The SCCRTC welcomes diversity in the workplace. |
| Please check the categories, which apply to you: |
| GENDER (SEX) INFORMATION: Male Female |
| RACE/ETHNIC GROUP INFORMATION: |
| Black (African American) not of Hispanic Origin: All persons having origins in any of the Black racial groups of Africa. |
| Asian or Pacific Islander: All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, Samoa and India. |
| American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition. |
| Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race. |
| White, not of Hispanic Origin: All persons having origins in any of the original peoples of Europe, North Africa or the Middle East. |
| Printed Name: Date: |
| Signature: |
| |
| |
| |
| |
| |