

# Application for Employment

Weirton Transit Corporation  
200 Municipal Plaza  
Weirton, WV 26062  
304.797.8597



**WEIRTON TRANSIT CORPORATION**  
200 Municipal Plaza | Weirton, WV

Information in this application will be used, and prior employers may be contacted, for purposes of investigation as required by Section 391.23 of the Motor Carriers Safety Regulations.

Date of Application: \_\_\_\_\_

Your Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(First) (Middle) (Last)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

SSN: \_\_\_\_\_ When can you work, if employed? \_\_\_\_\_

## Employment for the Past Three Years

Attach sheet if you had more than 3 employers in the past three years.

### Last Employer:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### Second Last Employer:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

### Third Last Employer:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

**Note:** On a separate sheet, list the Names, Addresses, Date of Employment, and Reason for Leaving for all employers for which you operated a Commercial Motor Vehicle during the seven (7) years preceding the three (3) years contained above. If none, state "None." here.

\_\_\_\_\_

### Education

Circle the Highest Grade Completed: 1 2 3 4 5 6 7 8      High School: 1 2 3 4      College: 1 2 3 4

Last School Attended: \_\_\_\_\_  
(Name) (City and State)

### Experience and Qualifications - Driver

**Drivers Licenses: List all unexpired licenses and endorsements.**

State	License Number	Type	Expiration Date

- A. Have you ever been denied a license, permit, or privilege to operate a motor vehicle? **Yes** \_\_\_ **No** \_\_\_
- B. Has any license, permit, or privilege ever been suspended or revoked? **Yes** \_\_\_ **No** \_\_\_
- C. Have you ever been convicted of a felony? **Yes** \_\_\_ **No** \_\_\_
- D. Have you ever tested positive in a pre-employment drug test? **Yes** \_\_\_ **No** \_\_\_
- E. Do you possess a passenger endorsement? **Yes** \_\_\_ **No** \_\_\_

If the answer to either A, B, C, or D is yes, attach a statement giving details.

**List states operated in for last five years:** \_\_\_\_\_

**Show Special Courses that will help you as a driver:** \_\_\_\_\_

### Driving Experience

Class of Equipment	Type of Equipment	From	To	Approx. No. of Miles (Total)

### Accident Record for Past 3 Years or More

*Include all motor vehicle accidents.*

	Date	Nature of Accident (Head on, Rear End, Upset, etc.)	Fatalities (Number)	Injuries (Number)
<b>Last Accident</b>				
<b>Next Previous</b>				
<b>Next Previous</b>				
<b>Next Previous</b>				

*\*Attach sheet if more room is needed.*

## Traffic Convictions and Forfeitures of Bond or Collateral in Past Three Years

*Other than parking violations.*

Location	Date	Charge	Penalty

*\*Attach sheet if more room is needed.*

## Other Experience and Qualifications

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## Professional and Character References

Name	Address	Phone Number



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## **Applicant Acknowledgment of Drug Test Requirement**

I understand that as part of my application for employment I must successfully complete a US-DOT drug test as required by 49 CFR Part 655. I understand that a negative test is required before I will be considered for hire. I also understand that if I am hired to fill a safety sensitive position, participation in the Weirton Transit Corporation drug and alcohol testing program is a condition of my employment.

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*(Applicant's Signature)*

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*(Date)*



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## Agreement

*To be read and signed by applicant.*

It is agreed and understood that the employer or his agents may investigate the applicants background to ascertain 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 Motor Carrier Safety Regulations. This applicant agrees to furnish such additional information and complete such examinations as may be required to complete his employment file.

I do hereby request and authorize the Weirton Transit Corporation, any person or persons, each former employer, or any Firm or Corporation referred to in this application, to give any information or answer all questions asked concerning my ability, work, or moral character in connection with this application, and 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 and that acceptance does not bind either party to a specific period or employment.

This certifies that this application 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)