

CRIS RURAL MASS TRANSIT DISTRICT



Rural Mass Transit District
Serving Vermilion County

615 E. Voorhees, Danville IL 61832
217-443-2999

Application for Employment (please print)

Date of Application _____

The filing of this application and the acceptance thereof does not necessarily indicate that there are open positions and it in no way obligates the CRIS Rural Mass Transit District (CRMTD). The information contained herein shall be considered confidential and is, together with all attached papers, etc., the property of the District. The CRIS Rural Mass Transit District is an equal opportunity employer. Federal law prohibits discrimination in employment practices because of race, color, religion, sex, age, or national origin.

Last Name		First Name		Middle	
Home Address		City	County	State	Zip
Telephone			Email		
Are you at least 25 years of age? Yes _____ No _____			Position Applied for		

Date Available for Work _____

Are there any hours/days you cannot work. NOTE: Rotating shifts on Saturday are required.

EDUCATION

LEVEL	NAME OF SCHOOL	CITY/STATE	YEARS COMPLETED	GRADUATED or DEGREE (Yes or no)
HIGH SCHOOL/ GED				
COLLEGE				
OTHER				

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SKILLS AND ABILITIES

SKILL	LENGTH & KIND OF TRAINING	YEARS OF EXPERIENCE

Do you have a valid IL Driver's License? _____ Yes _____ No

Are you legally qualified to work in the United States? _____ Yes _____ No

EMPLOYMENT RECORD

Name of Employer _____ Address _____ City/State _____ Phone _____	Supervisor's Name _____ Is CRMTD authorized to contact? Y_____ N_____	Dates of Employment From: To:	Position Title _____
Reason for Leaving _____			
Duties Performed _____			

Name of Employer _____ Address _____ City/State _____	Supervisor's Name _____	Dates of Employment From:	Position Title _____
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Phone	Is CRMTD authorized to contact? Y ___ N ___	To:	
Reason for Leaving			
Duties Performed			

Name of Employer	Supervisor's Name	Dates of Employment	Position Title

Address		From:	

City/State		To:	

Phone	Is CRMTD authorized to contact? Y ___ N ___		

Reason for Leaving			
Duties Performed			

PERSONAL REFERENCES

Please list three references other than relatives or employees

Name _____ Name _____ Name _____
 Position _____ Position _____ Position _____
 Company _____ Company _____ Company _____
 Telephone _____ Telephone _____ Telephone _____
 Email _____ Email _____ Email _____

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AS A CONDITION OF EMPLOYMENT, I AGREE TO THE FOLLOWING:

1. To take and pass a physical examination by a competent medical examiner designated by the CRIS Rural Mass Transit District and paid for by the CRIS Rural Mass Transit District.
2. To permit the CRIS Rural Mass Transit District to contact my previous employers for information relative to my record of employment with them.
3. To take and pass a pre-employment drug test as mandated by the Federal Transit Administration regulations.
4. To take and pass random drug and alcohol testing as mandated by the Federal Transit Administration.
5. That any false information given in this application will be sufficient for termination of my employment without notice at any time hereafter.
6. To allow the CRIS Rural Mass Transit District to review my past employment record, police record, the status of my driving record, my medical records, or anything else that might affect my employment with the district.

DATE _____

APPLICANT SIGNATURE _____

Use this space to summarize any additional information necessary to describe your qualifications for the specific position for which you are applying.



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FEDERAL EQUAL EMPLOYMENT OPPORTUNITY REQUIREMENTS

Under Public Law 88-352, Title VII of the Civil Rights Act of 1964, as amended by the Equal Employment Opportunity Act of 1972, the CRIS Rural Mass Transit District is required to maintain applicant flow data. This information will not be used for any employment decisions.

Please indicate how you were referred to CRIS Rural Mass Transit.

CRMT Employee _____ CRMT Employee Name _____
Job Site _____ Job Site Name _____
CRMT Website _____ Other _____

Following Information is Optional by the Applicant

Gender Man _____ Woman _____ Trans _____ Other _____
Race Caucasian _____ Black or African American _____ Asia _____
American Indian or Native Alaskan _____ Hispanic _____
Native Hawaiian or other Pacific Islander _____
Other _____

Are you a military veteran? Yes _____ No _____