



Employment Application Packet

Thank you for choosing VIA as a potential employer. To submit an application for employment please print this document and complete all sections. If you are applying for more than one position, list all positions on the application. For a list of current job openings go to www.viainfo.net or call the job line at 210-362-2002. Completed applications can be faxed, mailed, or delivered in person to:

VIA Metropolitan Transit
Employment and Testing Department
1021 San Pedro
San Antonio, Texas 78212
Fax: (210) 362-2575

While we are grateful that so many people consider us in their career plans, we unfortunately cannot interview all who apply. We carefully evaluate each application and select the best qualified candidates for further consideration. Those selected for interviews are contacted by telephone or by mail.

We also realize that you will be eager to follow up on your application. We will make every effort to answer any questions you may have, however, the large volume of calls that we receive can cause delays in processing. Your patience is appreciated.

Your application will be considered current for 6 months. During this period, you may provide any additional information simply by completing an application update.

Again, thank you for your interest in VIA and good luck in your career goals.

Office Phone: 362-2240 Job Line: 362-2002 Website: www.viainfo.net

PRE-EMPLOYMENT APPLICATION

VIA practices and complies with the laws pertaining to equal employment opportunity and does not discriminate in the hiring, promoting, terminating or awarding of benefits to any employee on the basis of race, color, religion, national origin, sex, age or disability.

MUST BE COMPLETED BY APPLICANT. PLEASE PRINT IN INK. COMPLETE EACH ITEM. (USE NA IF NOT APPLICABLE)

Use section on back if more space is needed.

- PERSONAL -

Full Name: _____ Date: _____
(Last) (First) (Middle)

Other Names Used: _____

Address: _____
(Street) (City) (State) (Zip)

Previous Address: _____
(Street) (City) (State) (Zip)

Soc. Sec. No.: _____ Telephone No.: _____ Alternate No.: _____

Position(s) applying for: _____

Salary Expected: _____ How Did You Find Out About This Vacancy? _____

Have You Ever Applied Before? _____ If Yes, Position: _____ Date: _____

Can you provide documentation required by law verifying your right to work in the U.S.? Yes _____ No _____

How Long Have You Lived in Bexar County? _____

In Case of Emergency, Notify: _____ Telephone: _____

Relatives Employed by or Associated with VIA:

Name: _____ Relationship: _____

Address: _____
(Street) (City) (State) (Zip)

Name: _____ Relationship: _____

Address: _____
(Street) (City) (State) (Zip)

- EDUCATION -

HIGH SCHOOL:

Name: _____ Date Last Attended: _____

City: _____ Circle Highest Grade Completed: 8 or less 9 10 11 12

If GED, Date and Place Received: _____

COLLEGES	DATES ATTENDED	NO. SEM. HOURS COMPLETED	MAJOR	DEGREE EARNED
Name:	From:			
City:	To:			
Name:	From:			
City:	To:			
Name:	From:			
City:	To:			

Other Schools or Training: _____

- WORK EXPERIENCE -

Give **complete** history since leaving school. Explain any gaps between employment. (Use additional sheets, if necessary.) If you are currently employed, may we contact your present employer? _____

START WITH MOST CURRENT EMPLOYER

EMPLOYER	EMPLOYMENT DATES (Mo./Yr.)	JOB TITLE & TYPE OF WORK DONE	REASON FOR LEAVING
1.Name:	End:		
Address:	Start:		
City:			
Phone:			
Immediate Supv's Name:	Name of Mgr. or Dept. Head:	Present/Ending Salary \$	
2.Name:	End:		
Address:	Start:		
City:			
Phone:			
Immediate Supv's Name:	Name of Mgr. or Dept. Head:	Ending Salary \$	
3.Name:	End:		
Address:	Start:		
City:			
Phone:			
Immediate Supv's Name:	Name of Mgr. or Dept. Head:	Ending Salary \$	
4.Name:	End:		
Address:	Start:		
City:			
Phone:			
Immediate Supv's Name:	Name of Mgr. or Dept. Head:	Ending Salary \$	
5.Name:	End:		
Address:	Start:		
City:			
Phone:			
Immediate Supv's Name:	Name of Mgr. or Dept. Head:	Ending Salary \$	
6.Name:	End:		
Address:	Start:		
City:			
Phone:			
Immediate Supv's Name:	Name of Mgr. or Dept. Head:	Ending Salary \$	

Please give details of any dismissals or gaps:

- REFERENCES -

Give personal references other than relatives. Please list DAYTIME PHONE NUMBERS. If possible, list clients, customers, co-workers, work associates, or neighbors.

NAME	OCCUPATION	ADDRESS	DAYTIME PHONE
1.			
2.			
3.			
4.			

- MILITARY -

Were you ever in military service? _____ If yes, what branch? _____

Dates of service – From _____ (mo.) _____ (yr.) to _____ (mo.) _____ (yr.)

Are you currently in the Reserves? _____ Reserve Unit of Assignment: _____

- DRIVER'S LICENSE -

List all driver's licenses you have had in the last 5 years.

STATE	LICENSE NUMBER	TYPE	EXPIRATION DATE

- MISCELLANEOUS -

Have you ever been denied unemployment compensation payments?..... Yes No

Have you been convicted of a crime, including DWI?..... Yes No
(Conviction of a crime is not an automatic bar to employment. All circumstances will be considered.)

Other than a divorce, have you ever been a party to a lawsuit?..... Yes No

Are you currently involved in any transactions, commitments or activities which could involve a conflict between your personal interests and those of VIA?..... Yes No

Please explain any questions marked Yes. Give details including dates.

OPTIONAL – Summarize your qualifications for the position for which you have applied: _____

OPTIONAL – List any extracurricular activities, awards, achievements, hobbies or interests: _____

PLEASE COMPLETE THIS SECTION IF APPLYING FOR ANY DRIVING OR MAINTENANCE POSITIONS.

(This includes Bus/Van Operator, Shop Repairman, Shop Attendant)

What types of vehicles can you operate? _____

Which of these have you driven professionally? _____

Total years driving experience: _____ Can you drive standard transmission vehicles? Yes _____ No _____

What driver training courses have you completed? _____

Reason for taking course: _____ Date completed: _____

Has your driver's license ever been suspended, revoked or placed on a probationary status? _____

If yes, explain: _____

LIST ALL TICKETS (MOVING VIOLATIONS ONLY) AND ALL ACCIDENTS (EVEN IF NOT AT FAULT) YOU HAVE HAD IN THE LAST 3 YEARS.

1. Date of violation or accident: _____ City & State: _____

Describe: _____

2. Date of violation or accident: _____ City & State: _____

Describe: _____

3. Date of violation or accident: _____ City & State: _____

Describe: _____

ALL APPLICANTS: Space for comments, suggestions or detailed answers to other questions:

I CERTIFY THAT ALL INFORMATION I HAVE PROVIDED IN THIS APPLICATION IS TRUE AND CORRECT, AND UNDERSTAND THAT ANY FALSIFIED STATEMENTS, OMISSIONS OR CONCEALMENTS MAY SUBJECT ME TO DISQUALIFICATION OR DISMISSAL. I HEREBY AUTHORIZE VIA TO MAKE ANY INVESTIGATION IT CONSIDERS NECESSARY IN REGARD TO MY CONSIDERATION FOR EMPLOYMENT.

Signed: _____



AUTHORITY TO RELEASE INFORMATION

I respectfully request and authorize you to furnish VIA Metropolitan Transit any and all information you may have concerning me, my work and my reputation. Please include any and all work records, school records, driving records, criminal conviction records, etc., including all information of a privileged or confidential nature and photocopies of same if requested. This information, including information obtained from the S.A. Retail Merchants Association, 1801 Broadway, San Antonio, Texas 78215, the Texas Department of Public Safety, 5805 N. Lamar Blvd., Austin, Texas 78773 and the Industrial Foundation of America, 402 East San Antonio Ave, Boerne, Texas 78006 (information supplied according to FCRA, 15 USC 1681) will be used to assist VIA Metropolitan Transit in assessing my ability to perform the functions of the position I am seeking.

I hereby release you, your organization or others from any liability or damage which may result from furnishing the information requested above.

I hereby authorize that a photocopy of this authorization be accepted with the same authority as this original.

Please Print:

(Name)

(Social Security Number)

(Date of Birth)

(Drivers License Number)

(Signature) / _____
(Date)



Equal Employment Opportunity Applicant Information

To further VIA's commitment to Equal Employment Opportunity (EEO), we ask that you voluntarily provide the following information. This sheet will be removed from your application prior to consideration for employment, and will be used for EEO, record keeping and research purposes only. Your cooperation in providing this information is essential to the success of our EEO program and will in no way effect your eligibility for employment.

Position applying for: _____ Date: _____

Race: (Choose the group with which you most clearly identify yourself.)

_____ Native American/Indian

_____ Black/African American

_____ Caucasian

_____ Oriental/Asian-Pacific Islander

_____ Hispanic/Spanish Surname

Sex: _____ Female

_____ Male