## DARTMOUTH TRANSPORTATION CO., INC. Employment Application

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, marital status, veteran status, physical or mental disability, sexual orientation, or any other federal protected class.

PLEASE PRINT				
Date of Application		Position(s) Applied For		
	: Work			
Salary Desired				
PERSONAL				
Last Name	First	Initial Oth	ner Name(s) U 	sed
<b>CURRENT ADDRE</b>	SS:			How Many
Number Stre	et City	State	Zip Code	Years:
<b>PREVIOUS ADDR</b>	ESS:			How Many
Number Stre	et City	State	Zip Code	Years:
<b>PREVIOUS ADDR</b>	ESS:			How Many
Number Stre	et City	State	Zip Code	Years:
			<u> </u>	
	Where We Can Contact You: Home		I/Other: ()	
Email Address:				
<ul><li>issued by a New</li><li>If no, and you a</li></ul>	years of age? under 16 years of age, can you furr Hampshire High School? re 16 or older, can you furnish a by your parent or legal guardian?		k with this	Yes No Yes No
Are you legally el	igible to work in the United States	?	İC.	Yes 🗌 No
• Have you ever be				Yes 🗌 No
• Have you ever be	employer(s)? een refused a bond? plain:			Yes 🗌 No
	een convicted of a crime?			Yes No
<ul> <li>If yes, please exp</li> </ul>	olain:			
the position for wh	criminal conviction will not necessari ich you are applying, any offer of empl isfactory results of a criminal backgrou	loyment may be conditione		
-	in the Armed Forces? Date Entered/	/ Date Discharged _		Yes 🗌 No

EDUCATION				
	Name & Address of School	Course of Study	Years Completed	Diploma/Degree Awarded
High School				
Undergraduate College/University				
Graduate/ Professional				
Vocational/ Business/Other				
Other special knowl	edge, skills or qualifications related	to the position(s) y	ou are applyi	ng for:
L				

## EMPLOYMENT HISTORY

List all positions, starting with your present or most recent position. If information is already on your resume, please attach your resume and fill in only those items not listed on your resume (e.g., reason for leaving, salary, etc.) Please provide an accurate and complete work history.

•		you ever worked for this company before? Where?	Yes	No
	,	Dates: From/ To/		
		Position: Reason for Leaving:		
Do	you ha	ave friends, relatives or family members who work for us? If so, please list their na	ame(s).	

Employed From	Employer Name	Supervisor Name:	Starting Salary \$ Full Time
//	Employer Address	May We Contact? Yes No	Part Time 🛛
Employed Until		Supervisor Phone #:	Ending Salary \$ Full Time
Job Title:		Reason for Leaving:	
Duties and Respons	sibilities:		

r	1	1	1
Employed From	Employer Name	Supervisor Name:	Starting Salary \$ Full Time
//	Employer Address		Part Time
Employed Until	1	May We Contact? Yes No	Ending Salary \$
		Supervisor Phone #:	Full Time
//			Part Time 🔲
Job Title:		Reason for Leaving:	
Duties and Respons	sibilities:	1	
Employed From	Employer Name	Supervisor Name:	Starting Salary \$
			Full Time
//	Employer Address		Part Time 🛛
Employed Until	1	May We Contact? Yes No	Ending Salary \$
		Supervisor Phone #:	Full Time 🔲
//			Part Time 🔲
Job Title:		Reason for Leaving:	
Duties and Respons	sibilities:		
Employed From	Employer Name	Supervisor Name:	Starting Salary \$
			Full Time
//	Employer Address	May We Contact? Yes No	Part Time 🛛
Employed Until			Ending Salary \$
		Supervisor Phone #:	Full Time
//			Part Time 🗌
Job Title:		Reason for Leaving:	
Duties and Respons	sibilities:		
Employed From	Employer Name	Supervisor Name:	Starting Salary \$
			Full Time
//	Employer Address	May We Contact? Yes No	Part Time 🗌
Employed Until			Ending Salary \$
		Supervisor Phone #:	Full Time
//			Part Time 🗌
Job Title:		Reason for Leaving:	
Duties and Responsibilities:			

REFERENCES	- Please n	rovide hi	isiness or	nrofessional	references	only
	- Fiease p	i uviue bu		professional		UTITY.

Name	Company	Telephone Number(s)
Occupation/Title	Relationship	

Name	Company	Telephone Number(s)
Occupation/Title	Relationship	

Name	Company	Telephone Number(s)
Occupation/Title	Relationship	

Name	Company	Telephone Number(s)
Occupation/Title	Relationship	

## APPLICANT CERTIFICATION AND AUTHORIZATION

I certify that all the above information and resume, if applicable, is true and complete. I understand that any misrepresentation or omission may result in my disqualification from further consideration for employment and/or my termination from employment.

Further, in order that Dartmouth Transportation Co., Inc. may process my application for employment, I hereby authorize Dartmouth Transportation Co., Inc. and its parents, affiliates, subsidiaries, officers, directors, employees, representatives, and agents (hereinafter collectively referred to as "Dartmouth Coach") to conduct a complete investigation into my background including, but not limited to, inquiring into my entire employment history, including my fitness for duty at all prior employment; education history; criminal record, driving record and military record, if any; to obtain opinions and references regarding my moral character and reputation and to solicit and obtain any other information Dartmouth Coach, in its sole discretion, deems as necessary to determine my eligibility for employment or for the purposes of confirming the accuracy or completeness of any information I have provided them.

In consideration for the processing of my application for employment with Dartmouth Coach, I hereby RELEASE, INDEMNIFY, AND HOLD HARMLESS Dartmouth Transportation Co., Inc. and all previous employers and other persons and organizations furnishing information in connection with Dartmouth Coach's investigation into my background from any and all liability based on their authorized receipt, disclosure, and use of the information gathered in processing my application for employment with them.

I understand that, if hired, any offer is contingent upon production of proof of employment eligibility and the completion of a Form I-9; a satisfactory criminal background records check and depending on the position for which I am hired, my submission to a post-offer drug test and medical examination to determine my ability to perform the essential functions of the position offered. I also understand that if offered a position I must satisfy a probationary period of 90 days.

Signature*	
Print Name	
Date	

\*<u>Digital Applicants:</u> By checking this box I understand I am electronically signing this application, and in doing so, it is considered the legal equivalent of my actual signature.