



## PART-TIME EMPLOYMENT APPLICATION

### Ludington Mass Transportation Authority

5545 W. Carr St. • Ludington, MI 49431 • (231) 845-1231 • [transit@lmta.us](mailto:transit@lmta.us)

*A person with a disability or handicap requiring accommodation for completing the application process should notify a member of management as soon as possible.*

*Filing this application does not imply that the applicant will be employed, but rather only that the applicant will be considered in competition with other applicants.*

*Ludington Mass Transportation Authority (hereafter "Company") is an Equal Opportunity Employer. It is the Company's policy to afford equal employment opportunity regardless of race, religion, gender, color, national origin, sex, age, marital status, height, weight, disability, or veteran status.*

#### PLEASE PRINT OR TYPE ALL INFORMATION REQUESTED

Today's Date: \_\_\_\_\_

Date Available to Begin Work: \_\_\_\_\_  
Month/Day/Year

Last Name		First Name		Middle Initial
Present Address	Apt. No.	City	State	Zip Code
Home Telephone Or Number You Can Be Reached: (       )       -				

Can you perform the functions of the job for which you are applying? ☐ Yes ☐ No

*Employers must make accommodations for disabled job applicants and employees where the accommodations do not impose an undue hardship on the employer.*

*Under Michigan law, disabled employees and job applicants may request an accommodation for their disability by notifying their employer in writing of the need for accommodation within 182 days of the date the disabled individual knows or should know that an accommodation is needed. This requirement does not apply to an individual's rights under the Americans with Disabilities Act. Failure to properly notify the employer may preclude any claim charging that the employer failed to accommodate the disabled individual.*

Would you be available to work any day of the week, on the weekends, and evenings?

☐ Yes ☐ No

Have you previously been employed by this transportation system?

☐ Yes ☐ No

Job Title \_\_\_\_\_

Dates of that employment: from \_\_\_\_\_ to \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Do you have any relatives currently employed with this transportation system?

☐ Yes ☐ No

If Yes, please specify:

Name \_\_\_\_\_

Position \_\_\_\_\_

## EDUCATION

HIGH SCHOOL	COURSE OF STUDY	DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
VOCATIONAL SCHOOL	COURSE OF STUDY	DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
		<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE	COURSE OF STUDY	DID YOU GRADUATE?	LIST DIPLOMA OR DEGREE
		<input type="checkbox"/> YES <input type="checkbox"/> NO	

Have you had training in or experience with the following areas? If so, briefly describe below.

- ☐ Defensive Driving
- ☐ Safety Programs
- ☐ Disabled Persons
- ☐ Senior Citizens
- ☐ Children Groups

Details of above:

WORK EXPERIENCE

List below your past two (2) employers, starting with your current/most recent job.

Name of Employer	Dates Employed		Address	Telephone No.
	From(mo/yr)	To(mo/yr)		
Job Title		Supervisor's Name and Title		
Work Performed				

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	From(mo/yr)	To(mo/yr)		
Job Title		Supervisor's Name and Title		
Work Performed				

## ADDITIONAL QUALIFICATIONS

Briefly describe job related skills and qualifications acquired from employment or other experience which you believe will assist us in deciding if and where to employ your services.

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## DRIVING LICENSE AND RECORD

Do you have a valid Michigan Driver's License? ☐ Yes ☐ No

If yes, state your license number \_\_\_\_\_

When does your driver's license expire \_\_\_\_\_

Do you have a valid Commercial Driver's License (CDL)? ☐ Yes ☐ No

Check all applicable boxes:

Group: ☐ A ☐ B ☐ C  
Endorsement: ☐ P ☐ X ☐ T ☐ N  
Type: ☐ C ☐ O

How many moving violation points do you currently have? \_\_\_\_\_

Do you currently have any restrictions on your driver's license regarding when and for what purpose you may drive a vehicle? ☐ Yes ☐ No

If Yes, explain \_\_\_\_\_

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Has your driver's license ever been suspended or revoked? ☐ Yes ☐ No

## DRIVING EXPERIENCE

Have you operated any of the following types of vehicles?

	Dates: From – To	For Whom?
<input type="checkbox"/> Transit Bus	_____	_____
<input type="checkbox"/> Para-Transit Van	_____	_____
<input type="checkbox"/> School Bus	_____	_____
<input type="checkbox"/> Truck	_____	_____
<input type="checkbox"/> Wrecker	_____	_____
<input type="checkbox"/> Private Carrier Bus	_____	_____

### SPECIALIZED DRIVING EXPERIENCE

Have you operated a vehicle used to transport disabled persons and/or senior citizens?

☐ Yes ☐ No

If Yes, did you receive any specialized training for this work? ☐ Yes ☐ No

If Yes, briefly describe the training you received.

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Do you have experience operating a hydraulic lift on a transit vehicle? ☐ Yes ☐ No

Have you received any passenger sensitivity training? ☐ Yes ☐ No

### ACCIDENT HISTORY

How many vehicle accidents have you been involved in, regardless of severity? \_\_\_\_\_

How many as operators of: Commercial vehicles \_\_\_\_\_ Private vehicles \_\_\_\_\_

List <u>ALL</u> vehicle accidents you have been involved in during the last five (5) years, beginning with the most recent.			
Date	City & State	Brief Description of Accident	Were You Cited?

### TRAFFIC VIOLATIONS

List <u>ALL</u> traffic violations, other than parking, for which you have been cited during the last five (5) years, beginning the with the most recent.				
Date of Violation	Infraction/Offense	City & State	Date of Conviction	Disposition & Fine

## ADDITIONAL INFORMATION

Have you ever been convicted of a felony crime or a misdemeanor? ☐ Yes ☐ No

If Yes, provide the following information:

Date	Nature of Offense	City & State	Penalty/Fine

## **PLEASE READ CAREFULLY APPLICANT'S CERTIFICATION AND AGREEMENTS**

### Information Accuracy

I confirm that all of the information furnished on this Employment Application is complete and correct. I understand and agree that any falsification, misrepresentation or omission of fact, either on this Application, or during the pre-hire process, will be reason for (1) my not being offered employment; or (2) dismissal if employed at any time from the service of this transit agency.

### Background Information

I authorize all previous employers and supervisors to provide this agency's representatives, on a confidential basis, all requested information regarding me and my previous employment. I further authorize this agency to obtain civil, criminal, credit, or other records which may be required to evaluate my eligibility for employment. I also agree to release this agency and all previous employers and supervisors from any liabilities and damages that may result from furnishing information to this agency.

### Drug/Alcohol Testing

I understand that an offer of employment is conditional upon the results of a drug and alcohol screening as required by law and/or defined by agency policy. I consent to that screening. I understand that a refusal to submit to a drug screening, positive drug test results, falsification of test results, or alteration of test forms will result in the disqualification of my application for employment or the termination of my employment.

### Employment Status

I understand that the employment relationship at this agency is "at will," which means that it may be terminated by the employee or the agency at any time with or without notice and with or without cause. I also understand that no other statement, made orally or in writing, may change this at will relationship unless expressly stated in a document signed by both the agency's General Manager and by me stating that the at will relationship has been modified. I agree that I am willing to accept employment, if offered, based on these terms.

Claims

I agree that any action or suit against this agency, its agents or employees, arising out of my employment or termination of employment, including, but not limited to, claims arising under State, but not Federal civil rights statutes, must be brought within 180 days of the event giving rise to the claims, or be forever barred. I waive any limitation periods to the contrary. I further agree that if I should bring any non-statutory action or claim arising out of my employment against this agency, in which the agency prevails, I will pay to the agency any and all costs incurred by the agency in defense of said claims or actions, including attorney fees.

Signature\_\_\_\_\_

Date\_\_\_\_\_

Print Name\_\_\_\_\_





## **The Lifestyle of a Transit Operator: Is it for You?**

**You must be ready to work.** As a bus operator, the lives of our customers and the public are in your hands. You must be alert and vigilant while operating a transit vehicle. You must arrive at work promptly, properly rested, and ready to carry out your assigned tasks safely and efficiently.

**Bus operators work early mornings, nights and weekends.** Our transit system provides service daily, and during many hours each day. Non-standard work schedules are essential to providing this service. You will be required to work during some holidays, and in bad weather conditions. This will likely be true during most of your career as an operator.

**Your personal schedule must adapt to your work schedule.** Your work schedule may require sleeping at unusual hours, eating at different times, and having fewer opportunities to be with your friends and family.

**A bus operator must have superior driving skills and knowledge.** Professional drivers are responsible for avoiding all accidents, obeying all traffic laws, and ensuring at all times the safety of their passengers, their vehicles, and themselves.

**You must be able to adapt yourself to the needs of different types of people.** Bus transit work frequently involves meeting the needs of mentally and physically challenged persons and senior citizens. Their various requirements call for understanding, sensitivity, patience, and caution when they are transported in our vehicles.

**Safety is priority one.** You must always remember that you will be held personally and solely responsible for conducting your assigned work tasks safely; and a failure to do so can result in the loss of your job.