



APPLICATION FOR EMPLOYMENT
(Complete in your own handwriting in ink)

Date of Application: _____

To Applicant: We are an equal opportunity employer and comply with all federal, state and local laws, which prohibit discrimination in employment because of race, color, national origin, age, sex, religion, disability, marital status, sexual orientation or any other characteristic protected by applicable law.

GENERAL EMPLOYMENT INFORMATION

Name: _____

Address: _____
Street Address

City _____ State _____ Zip _____ Years at Address *

* If less than 3 years at current address, please list previous address

Address: _____
Street Address

City _____ State _____ Zip _____ Years at Address

Telephone Number: _____ Cell Phone Number: _____

Email Address: _____

Social Security Number: _____ - _____ - _____

Other names you are known by: _____

Position Applied for: _____

Salary Desired: \$ _____ Date Available for Work: _____

How did you hear about Port Imperial Ferry Corp? If referred by an employee, please indicate the name of the employee.

Please indicate the type of employment desired:

_____ Full Time _____ Part Time _____ Temporary _____ Seasonal

Days and Hours Available for Work

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Employer's Name: _____

Address/Phone Number: _____

Dates of Employment: From: _____ To: _____

Job Title: _____

Duties Involved: _____

Starting Salary: \$ _____ Ending Salary: \$ _____

Supervisor's Name: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes ___ No ___

Employer's Name: _____

Address/Phone Number: _____

Dates of Employment: From: _____ To: _____

Job Title: _____

Duties Involved: _____

Starting Salary: \$ _____ Ending Salary: \$ _____

Supervisor's Name: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes ___ No ___

References (please list professional references only)

Name: _____

Address: _____

Daytime Telephone Number: _____

Occupation: _____

Dates Known/Relationship To You: _____

Name: _____

Address: _____

Daytime Telephone Number: _____

Occupation: _____

Dates Known/Relationship To You: _____

Name: _____

Address: _____

Daytime Telephone Number: _____

Occupation: _____

Dates Known/Relationship To You: _____

ADDITIONAL QUESTIONS

Are you legally authorized to work in the United States? Yes ___ No ___
(Proof of US Citizenship or your legal right to work in the U.S. required by the 3rd day of Employment)

If applying for a Bus Driver position: Do you possess a CDL License? Yes ___ No ___

Do you have at least two years of bus driving experience? Yes ___ No ___

Are you at least 18 years old? Yes ___ No ___
(If under 18, hire is subject to verification that you are of minimum legal age)

Can you with or without a reasonable accommodation perform the essential functions of this job? Yes ___ No ___

If no, please describe the function that cannot be performed:

Note: we comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.

Have you ever worked for Port Imperial Ferry Corp before? Yes ____ No ____

If yes, please state when: _____

Have you ever applied for a position at Port Imperial Ferry Corp? Yes ____ No ____

If yes, please state the position and the application date: _____

Are you related to a current employee at Port Imperial Ferry Corp? Yes ____ No ____

If yes, please provide the name of the employee: _____

Have you obtained any special skills or abilities as the result of service in the military that you believe are relevant to your qualifications for employment? Yes ____ No ____

If so, please describe:

List below any other information that relates to your ability to perform the job for which you have applied, such as licenses, professional memberships, language skills, and computer skills:

PRE-EMPLOYMENT STATEMENT

Please Read Carefully, Initial Each Paragraph and Sign Below:

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. _____ Initial

I hereby authorize Port Imperial Ferry Corp to thoroughly investigate my references, Work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to Port Imperial Ferry Corp any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Port Imperial Ferry Corp, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. _____ Initial

I understand that nothing contained in the application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create an employment contract between Port Imperial Ferry Corp and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at will at any time, with or without cause or prior notice, at the option of either myself or Port Imperial Ferry Corp, and that no promises or representations contrary to the foregoing are binding on Port Imperial Ferry Corp unless made in writing and signed by me and Port Imperial Ferry Corp's designated representative. _____ Initial

I certify that all statements herein are true and understand that any falsification or willful omission may result in a refusal of employment or my dismissal if hired.

Applicant's Signature

Date

Notification and Release Authorization

Please be advised that **NY Waterway** intends to use a consumer and/or investigative consumer report as part of your application for employment and continued evaluation during the course of your employment with the company should you become employed. Your consent for the procurement and use of such a report is required. The consumer report will contain information from public records, which may include, but are not limited to, social security number and other information bearing on your credit worthiness, credit standing or credit capacity, motor vehicle operation history, education history, employment history, and criminal history, to the extent permitted by law. An investigative consumer report can contain information from public records as stated above, in addition to interviews with employers, neighbors, friends, and associates for knowledge concerning your character, general reputation, personal characteristics or mode of living.

Authorization:

I voluntarily and knowingly authorize any party or agency contacted to give records they may have concerning my social security number, credit worthiness, credit standing, credit capacity, motor vehicle operation history, employment history and performance, education history, criminal history, or other information to the extent permitted by law.

I further understand that, upon my written request, I will be given the name and address of each consumer reporting agency from which a consumer report or investigative consumer report may have been obtained, and, if an investigative consumer report has been obtained, a description of the nature and scope of the investigation. I understand that I may obtain additional information concerning the report by contacting the consumer reporting agency.

The report will be prepared by: HireRight, LLC ("HireRight") will prepare or assemble the background reports for the Company. HireRight is located and can be contacted at 3349 Michelson Drive, Suite 150, Irvine, CA 92612, (800) 400-2761, www.hireright.com.

I understand that any consumer report or investigative consumer report prepared will be used strictly for employment purposes as defined in the Fair Credit Reporting Act, as a report to be used for the purpose of evaluation for employment, promotion, reassignment or retention as an employee. I further understand that any offer of employment, promotion or reassignment will be conditional upon the receipt of satisfactory information as required and that to be considered for employment, promotion, or reassignment; I must authorize the procurement of such Report(s). A photographic or faxed copy of this Notification and Release Authorization shall be as valid as the original.

- ALL Applicants:** I acknowledge having received "A Summary of Your Rights Under the Fair Credit Reporting Act"
- CA, MN, OK Residents Only:** Yes, I wish to receive a copy of any report obtained pursuant to this release.

The following information must be filled out completely and signed by all applicants:

PLEASE PRINT ALL INFORMATION BELOW

Last Name, First Name, Middle Initial:	Social Security Number:
Additional Name(s) Used:	Date of Birth/Place of Birth:
Driver's License Number State/Country:	Position Applied For:
Current Address (street, city, state, zip)	
Previous Address (street, city, state, zip)	

Signed: _____

Dated: _____