



**Bloomington Transit**

# EMPLOYMENT APPLICATION

*The Bloomington Public Transportation Corporation*

www.bloomingtontransit.com  
130 West Grimes Lane  
Bloomington, Indiana 47403  
(812) 332-5688

***We consider applicants for all positions without regard to their race, ancestry, color, religion, sex, national origin, age, veteran status, sexual orientation, disability, gender identity, or any other legally protected status. Bloomington Transit is committed to complying with the Americans with Disabilities Act. If you as an applicant or employee need a reasonable accommodation, please let us know.***

*If you need help filling out this application form or for any phase of the employment process, please notify the person that gave you this form and every effort will be made to accommodate your needs in a reasonable amount of time. Please PRINT clearly. Incomplete or illegible applications will not be processed.*

## PERSONAL INFORMATION

NAME \_\_\_\_\_  
(Last) (First) (Middle)

Social Security: \_\_\_\_\_ Date: \_\_\_\_\_

Present Address:  
\_\_\_\_\_

Permanent Address:  
\_\_\_\_\_

Telephone: ( ) \_\_\_\_\_

Referred by: \_\_\_\_\_

## POSITION YOU ARE APPLYING FOR:

\_\_\_\_\_

Date you can start: \_\_\_\_\_ Salary desired: \_\_\_\_\_

If hired, would you have a reliable means of transportation to and from work?  Yes  No

Are you age 21 or older?  Yes  No

Are you available for work on nights and weekends?  Yes  No

Would you be able to work overtime, if necessary?  Yes  No

Have you ever been terminated or asked to resign from a job?  Yes  No

(Answering yes to this question will not necessarily disqualify an applicant from employment)

Please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any other experience, training, qualifications or skills that make you especially suited for work at Bloomington Transit?  Yes  No List below.

\_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or immigration Status?  Yes  No

(Proof of eligibility to work in the U.S. will be required upon employment.)

Have you ever, under your name or another name, been arrested for or *convicted* of a crime that has not been expunged by a court?  Yes  No Please elaborate: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If yes, please explain each conviction fully, when, where and of what you were convicted and the disposition of the case(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you currently charged with a crime, or released on bond or on your own recognizance, pending trial for a criminal offense?  Yes  No

Do you have a driver's license?  Yes  No If yes, what state? \_\_\_\_\_

Your driver's license number: \_\_\_\_\_

Is your driver's license currently suspended? \_\_\_\_\_

Has your driver's license ever been suspended? \_\_\_\_\_

List any moving violations within the past three years \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted for driving under the influence (DUI)?  Yes  No

In the past two years have you refused or had a positive, adulterated or substituted test result on a DOT drug screen?  Yes  No

In the past two years have you refused or had a positive, adulterated or substituted test result on a DOT pre-employment drug screen?  Yes  No

Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodations?  Yes  No

## EDUCATION

High School Graduate?

Yes  No

Name of High School \_\_\_\_\_

Date and location of your GED certificate \_\_\_\_\_

Name of College you attended \_\_\_\_\_

Did you graduate?  Yes  No

Major and Type of Degree \_\_\_\_\_

## Trade/Business/Correspondence Schools

Name \_\_\_\_\_

Types of Degrees \_\_\_\_\_

May we inquire of your present employer?  Yes  No

Have you applied to this office before?  Yes  No When? \_\_\_\_\_

## FORMER EMPLOYERS Please list all present and past employment for the last 10 years.

*As part of the application process and consistent with the job described, we may seek information related to your character, work habits, performance, experience, driving records, court records, education, and credentials. The correct telephone numbers of past employers are critical. Please complete this section even if you are attaching a resume.*

### CURRENT OR MOST RECENT EMPLOYER

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of employment: \_\_\_\_\_ to: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Your Supervisor's Name: \_\_\_\_\_

Ending salary or wage: \_\_\_\_\_

Your position and duties: \_\_\_\_\_

Exact reason for leaving \_\_\_\_\_

Did you leave this employment voluntarily?  Yes  No

**SECOND MOST RECENT EMPLOYER**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of employment: \_\_\_\_\_ to: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Your Supervisor's Name: \_\_\_\_\_  
Ending salary or wage: \_\_\_\_\_  
Your position and duties: \_\_\_\_\_

Exact reason for leaving \_\_\_\_\_  
Did you leave this employment voluntarily?  Yes  No

**THIRD MOST RECENT EMPLOYER**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of employment: \_\_\_\_\_ to: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Your Supervisor's Name: \_\_\_\_\_  
Ending salary or wage: \_\_\_\_\_  
Your position and duties: \_\_\_\_\_

Exact reason for leaving \_\_\_\_\_  
Did you leave this employment voluntarily?  Yes  No

**FOURTH MOST RECENT EMPLOYER**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of employment: \_\_\_\_\_ to: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Your Supervisor's Name: \_\_\_\_\_  
Ending salary or wage: \_\_\_\_\_  
Your position and duties: \_\_\_\_\_

Exact reason for leaving \_\_\_\_\_  
Did you leave this employment voluntarily?  Yes  No

**FIFTH MOST RECENT EMPLOYER**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of employment: \_\_\_\_\_ to: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Your Supervisor's Name: \_\_\_\_\_  
Ending salary or wage: \_\_\_\_\_  
Your position and duties: \_\_\_\_\_

Exact reason for leaving \_\_\_\_\_  
Did you leave this employment voluntarily?  Yes  No

**UNEMPLOYMENT HISTORY: Please list any time(s) you were not employed (after leaving school) in the last 10 years. You do not need to include periods of one month or less.**

| Time Period | Reason Unemployed |
|-------------|-------------------|
| _____       | _____             |
| _____       | _____             |

## REFERENCES:

List three persons **not related to you**, whom you have known at least one year, and who are familiar with your professional reputation/work performance.

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
# Years acquainted \_\_\_\_\_
2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
# Years acquainted \_\_\_\_\_
3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
# Years acquainted \_\_\_\_\_

**In case of emergency notify:**

PLEASE LIST YOUR RESIDENCES OF THE PAST SEVEN YEARS  
(PLEASE INCLUDE COUNTY)

Example: 130 West Grimes Lane, Bloomington, Indiana 47403, Monroe County

1. Address: \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_
2. Address: \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_
3. Address: \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_
4. Address: \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_
5. Address: \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_
6. Address: \_\_\_\_\_ City \_\_\_\_\_  
State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_ Dates \_\_\_\_\_ to \_\_\_\_\_

**PLEASE READ AND SIGN THE FOLLOWING STATEMENT**

By my signature and initials placed below, I declare under penalty of perjury that the information provided in this employment application (and accompanying resume, if any) is true and complete. I understand that any false information or significant omissions may disqualify me from further consideration for employment, and may be justification for my dismissal from employment if discovered at a later date. I understand that any job offer will be conditional based on the satisfactory review of my qualifications including any and all background or drug screening which may be required. \_\_\_\_\_Initials

If Bloomington Transit makes a job offer, subject to the results of a physical examination, I give permission for a physical examination including a pre-employment drug screen. [Results will be held in confidence by Bloomington Transit except where release of such information is required by law.] \_\_\_\_\_Initials

I voluntarily and knowingly authorize any past employer, educational institution, law enforcement agency, state, local or federal agency, military branch, the National Personnel Records Center, personal references, and/or other persons, to give records or information they may have concerning my criminal history, motor vehicle records, educational history, licensing, employment (including character, earnings history and reasons for termination) or any other information requested by Bloomington Transit to determine my eligibility for employment. \_\_\_\_\_Initials

I agree to immediately notify Bloomington Transit if I am convicted of a crime while my job application is pending, or during my employment, if hired. If I become employed, I agree to comply with the rules, regulations, policies and procedures of Bloomington Transit. \_\_\_\_\_Initials

I certify that all of the information provided on this application is true and accurate.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for completing this application. If there is a current opening in the position you are seeking and the information in your application suggests you meet minimum qualifications and are among the best qualified candidates for that position, you may be contacted for an interview. If you are interviewed, you will be informed of a final decision once the entire interview process is completed. This includes a complete background check and pre-employment drug screen. If we have no current openings, your application will be kept active for 180 days. If you wish to be considered for employment after that time, you must reapply. Thank you for your interest in our company.

**ONLY APPLICANTS SELECTED FOR INTERVIEWS WILL BE CONTACTED**

## **A Summary of Your Rights Under the Fair Credit Reporting Act**

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus that gather and sell information about your creditworthiness to creditors, employers, landlords, and other businesses. The FCRA gives you specific rights, which are summarized below. You may have additional rights under state law. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit), or write to: Consumer Response Center, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

**You must be told if information in your file has been used against you.** Anyone who uses information from a consumer reporting agency to deny your application for credit, insurance, or employment – or take another adverse action against you – must tell you and give you the name, address, and phone number of the agency that provided the information.

**You can find out what is in your file.** At any time, you may request and obtain your report from a consumer reporting agency. You will be asked to provide proper identification, which may include your Social Security number. In many cases the report will be free. You are entitled to free reports if a person has taken adverse action against you because of information in a report; if you are the victim of identify theft; if you are the victim of fraud; if you are on public assistance; or if you are unemployed but expect to apply for employment within 60 days. In addition, you are entitled to one free report every twelve months from each of the nationwide credit bureaus and from some specialized consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for details about how to obtain your free report.

**You have a right to know your credit score.** Credit scores are numerical summaries of a consumer's creditworthiness based on information from consumer reports. For a fee, you may get your credit score. For more information, click on [www.ftc.gov/credit](http://www.ftc.gov/credit). In some mortgage transactions, you will get credit score information without charge.

**You can dispute inaccurate information with the consumer reporting agency.** If you tell a consumer reporting agency that your file has inaccurate information, the agency must take certain steps to investigate unless your dispute is frivolous. For an explanation of dispute procedures, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).

**Inaccurate information must be corrected or deleted.** A consumer reporting agency or furnisher must remove or correct information verified as inaccurate, usually within 30 days after you dispute it. However, a consumer reporting agency may continue to report negative data that it verifies as being accurate.

**Outdated negative information may not be reported.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

**Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need as determined by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.

**Your consent is required for reports that are provided to employers.** A consumer reporting agency may not give out information about you to your employer, or potential employer, without your written consent. Blanket consent may be given at the time of employment or later.

**You may choose to remove your name from consumer reporting agency lists for unsolicited credit and insurance offers.** These offers must include a toll-free phone number you can call if you choose to take your name and address off lists in the future. You may opt-out at the major credit bureaus by calling 1-800-XXXXXXX.

**You may seek damages from violators.** If a consumer reporting agency, a user of consumer reports, or, in some cases, a furnisher of information to a consumer reporting agency violates the FCRA, you may sue them in state or federal court.

**Identity theft victims and active duty military personnel have additional rights.** Victims of identity theft have new rights under the FCRA. Active-duty military personnel who are away from their regular duty station may file “active duty” alerts to help prevent identity theft. For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

The FCRA gives several federal agencies authority to enforce the FCRA:

| <b>TO COMPLAIN AND FOR INFORMATION:</b>   | <b>PLEASE CONTACT:</b>  |
|---|---|
| Consumer reporting agencies, creditors and others not listed below  | Federal Trade Commission<br>Consumer Response Center - FCRA<br>Washington, DC 20580 1-877-382-4367 (Toll-Free)          |
| National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)        | Office of the Comptroller of the Currency<br>Compliance Management, Mail Stop 6-6<br>Washington, DC 20219 800-613-6743  |
| Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)                           | Federal Reserve Board<br>Division of Consumer & Community Affairs<br>Washington, DC 20551 202-452-3693                  |
| Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name) | Office of Thrift Supervision<br>Consumer Programs<br>Washington, DC 20552 800-842-6929                                  |
| Federal credit unions (words "Federal Credit Union" appear in institution's name)   | National Credit Union Administration<br>1775 Duke Street<br>Alexandria, VA 22314 703-518-6360                           |
| State-chartered banks that are not members of the Federal Reserve System  | Federal Deposit Insurance Corporation<br>Division of Compliance & Consumer Affairs<br>Washington, DC 20429 800-934-FDIC |
| Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission                   | Department of Transportation<br>Office of Financial Management<br>Washington, DC 20590 202-366-1306                     |
| Activities subject to the Packers and Stockyards Act, 1921  | Department of Agriculture<br>Office of Deputy Administrator - GIPSA<br>Washington, DC 20250 202-720-7051                |



## **BACKGROUND CHECK DISCLOSURE AND AUTHORIZATION FORM**

In the interest of maintaining the safety and security of our customers, employees and property, BPTC (the "Company") will order a "consumer report" (a background report) or "investigative consumer report" on you in connection with your employment application, and if you are hired, or if you already work for the Company, may order additional background reports on you for employment purposes.

The background check company, ADP Screening and Selection Services, will prepare the background report for the Company. ADP Screening and Selection Services is located at 301 Remington Street, Fort Collins, CO, 80524, and can be reached by phone at 800-367-5933 or at their Internet Web site address [www.adpselect.com](http://www.adpselect.com).

The background report may contain information concerning your character, general reputation, personal characteristics, mode of living, and credit standing. The types of information that may be ordered include but are not limited to: Social Security number verification; criminal, public, educational and, as appropriate, driving records checks; verification of prior employment; reference, licensing and certification checks; credit reports; drug testing results; and, if applicable, worker's compensation injuries. Workers' compensation information will only be requested in compliance with federal Americans with Disabilities Act and/or any other applicable federal, state or local laws and only after a conditional job offer is made. Credit history will only be requested when permitted by law and where such information is substantially related to the duties and responsibilities of the position for which you are applying. The information may be obtained from private and public record sources, including personal interviews with your associates, friends, and neighbors. (An "investigative consumer report" is a background report that includes information from such personal interviews, except in California where that term means any background report that is not a credit report.) The nature and scope of the most common form of investigative consumer report is an investigation into your education and/or employment history conducted by ADP Screening and Selection Services or another outside organization.

You may request more information about the nature and scope of an investigative consumer report, if any, by telephoning the Company at 812-961-0523. A summary of your rights under the Fair Credit Reporting Act is also being provided to you with this form.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will find these rights summarized on [A Summary of Your Rights Under the Fair Credit Reporting Act](#) and [A Summary of Your Rights Under the Provisions of California Civil Code Section 1786.22](#) as provided here.

### **STATE LAW NOTICES**

If you live or work for the Company in the states listed below, please note the following:

**CALIFORNIA:** You may view the file that ADP Screening and Selection Services has for you, and order a copy of the file, upon submitting proper identification and paying copying costs, by coming to their offices, during normal business hours and on reasonable notice, or by certified mail or mail. You may also ask for a file-summary by telephone. ADP Screening and Selection Services can answer questions about information in your file, including any coded information. If you come in person, another person can come with you, so long as that person can show proper identification.

**MAINE:** If you ask us, you have the right to know whether the Company ordered an investigative consumer report on you. You may request the name, address, and telephone number of the nearest office for ADP Screening and Selection Services. You will get this information within 5 business days of our receipt of your request. You have the right to ask ADP Screening and Selection Services for a free copy of the report.

**MARYLAND:** If the Company obtains credit history information on you, it will be used to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the job for which you are being considered.

**MASSACHUSETTS/NEW JERSEY:** If you submit a request to us in writing, you have the right to know whether the Company ordered an investigative consumer report from ADP Screening and Selection Services. You may inspect and order a free copy of the report by contacting ADP Screening and Selection Services.

**MINNESOTA:** If you submit a request to us in writing, you have the right to get from the Company a complete and accurate disclosure of the nature and scope of the consumer report or investigative consumer report ordered, if any.

**NEW YORK:** If you submit a request to us in writing, you have the right to know whether the Company ordered a consumer report or an investigative consumer report from ADP Screening and Selection Services, and you will be provided with the name and address of ADP Screening and Selection Services. You may inspect and order a free copy of the reports by contacting ADP Screening and Selection Services. By signing below, you certify you have received a copy of [Article 23A of the New York Correction Law](#) is being provided with this form.

**OREGON:** If the Company obtains credit history information on you, it will be used to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the job for which you are being considered.

**WASHINGTON STATE:** If you submit a request to us in writing, you have the right to get from the Company a complete and accurate disclosure of the nature and scope of the investigative consumer report we ordered, if any. You also have the right to ask ADP Screening and Selection Services for a written summary of your rights under the Washington Fair Credit Reporting Act. If the Company obtains information bearing on your credit worthiness, credit standing or credit capacity, it will be used to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the job for which you are being considered.

**AUTHORIZATION FOR BACKGROUND CHECKS**

After carefully reading this Background Check Disclosure and Authorization form, I authorize the Company to order my background report, including investigative consumer reports. I understand that the Company may rely on this authorization to order additional background reports, including investigative consumer reports, during my employment without asking me for my authorization again as allowed by law.

I also authorize the following agencies and entities to disclose to ADP Screening and Selection Services and its agents all information about or concerning me, including but not limited to: my past or present employers; learning institutions, including colleges and universities; law enforcement and all other federal, state and local agencies; federal, state and local courts; the military; credit bureaus; testing facilities; motor vehicle records agencies; if applicable, worker's compensation injuries; all other private and public sector repositories of information; and any other person, organization, or agency with any information about or concerning me. Workers' compensation information will only be requested in compliance with federal Americans with Disabilities Act and/or any other applicable federal, state or local laws and only after a conditional job offer is made. The information that can be disclosed to ADP Screening and Selection Services and its agents includes, but is not limited to, information concerning my employment history, earnings history, education, credit history, motor vehicle history, criminal history, military service, professional credentials and licenses and substance abuse testing.

I agree the Company may rely on this authorization to order background reports, including investigative consumer reports, from companies other than ADP Screening and Selection Services without asking me for my authorization again as allowed by law. I also agree that a copy of this form is valid like the signed original. I certify that all of the personal information I provided is true and correct.

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Maiden/Other Names \_\_\_\_\_ Years Used \_\_\_\_\_

**If you live or work for the Company in California, Minnesota or Oklahoma:** Check this box if you would like a free copy of your background check report:

Signature \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Month/Day/Year)

If required, notarize here. When using an embossed seal, please shade with a pencil before faxing.

Subscribed and sworn before me:

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
My Commission Expires

## PRE-EMPLOYMENT SCREENING POLICY

As part of the process of weighing an applicant's qualifications and determining his or her suitability for the open positions, Bloomington Transit requires background checks for all finalists for a position. ADP Select, a consumer reporting agency, conducts these background checks.

All applicants for employment with Bloomington Transit are asked to sign a release form authorizing the appropriate background checks. Any applicant who refuses to sign a release form is no longer considered eligible for employment. Applicants are also expected to provide references from their former employers as well as educational reference information that can be used to verify academic accomplishments and records.

The background check will include verification of information provided on the completed application for employment, the applicant's resume or on other forms used in the hiring process. Information to be verified includes, but not limited to, social security number and previous addresses, Bloomington Transit will also conduct a reference check and verification of the applicant's education and employment background as stated on the employment application or other documents listed above.

The background check will also include a criminal record check. If a felony conviction is discovered, before an employment decision is made, a determination will be made as to whether the conviction is related to the position for which the individual is applying or if it would present safety or security risks.

Additional checks such as driving record or credit report may be made on applicants for particular job categories if appropriate and job related.

If an applicant is denied employment wholly or partially because of the information obtained in a background check conducted by ADP Select, the applicant will be informed of this and given the name, address, and phone number of the vendor to contact if he or she has specific questions about the result of the check or wants to dispute its accuracy.

**ANY APPLICANT WHO PROVIDES MISLEADING, ERRORNEOUS, OR WILLFULLY DECEPTIVE INFORMATION TO BLOOMINGTON TRANSIT ON AN EMPLOYMENT APPLICATION, RESUME, OR IN A SELECTION INTERVIEW, IS IMMEDIATELY ELIMINATED FROM FURTHER CONSIDERATION FOR EMPLOYMENT WITH BLOOMINGTON TRANSIT.**

**APPENDIX A**  
**BLOOMINGTON PUBLIC TRANSPORTATION CORPORATION**  
**SUBSTANCE ABUSE PROGRAM**

Complete this form only if you are applying for a safety-sensitive position and have formerly been employed by a DOT regulated employer.

**Release of Information Form --49 CFR Part 40 Drug and Alcohol Testing"**

**Section I.** To be completed by the new employer, signed by the employee, and transmitted to the previous employer:

Employee Printed or Typed Name: \_\_\_\_\_  
Employee Social Security #: \_\_\_\_\_

I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer, listed in *Section I-B*, to the employer listed in *Section I-A*. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released in *Section II-A* by my previous employer, is limited to the following DOT -regulated testing items:

1. Alcohol tests with a result of 0.04 or higher;
2. Verified positive drug tests;
3. Refusals to be tested;
4. Other violations of DOT agency drug and alcohol testing regulations;
5. Information obtained from previous employers of a drug and alcohol rule violation;
6. Documentation, if any, of completion of the return-to-duty process following a rule violation.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I-A.**  
New Employer Name: Bloomington Public Transportation Corporation  
Address: 130 W. Grimes Lane Bloomington, IN. 47403  
Phone # 812-332-5688 Fax # 812-332-3660  
Designated Employer Representative: \_\_\_\_\_

**I-B.**  
Previous Employer Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax # \_\_\_\_\_  
Designated Employer Representative (if known): \_\_\_\_\_

**Section II.** To be completed by the previous employer and transmitted by mail or fax to the new employer: II-A. In the two years prior to the date of the employee's signature (in Section I), for DOT -regulated testing --

- |   |                        |
|---|------------------------|
| 1. Did the employee have alcohol tests with a result of 0.04 or higher?                                   | YES ___ NO ___         |
| 2. Did the employee have verified positive drug tests?  | YES ___ NO ___         |
| 3. Did the employee refuse to be tested?  | YES ___ NO ___         |
| 4. Did the employee have other violations of DOT agency drug and alcohol testing regulations?             | YES ___ NO ___         |
| 5. Did a previous employer report a drug and alcohol rule violation to you?                               | YES ___ NO ___         |
| 6. If you answered "yes" to any of the above items, did the employee complete the return-to-duty process? | N/A ___ YES ___ NO ___ |

*NOTE: If you answered 'yes' to item 5, you must provide the previous employer's report. If you answered 'yes' to item 6, you must also transmit the appropriate return-to-duty documentation (e.g., SAP report(s), follow-up testing record).*

**II-B.**  
Name of person providing information in *Section II-A*: \_\_\_\_\_  
Title: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Date: \_\_\_\_\_

**APPLICANTS WRITTEN CONSENT FORM**

I \_\_\_\_\_, give my consent to my former employer  
\_\_\_\_\_, to release the information requested above to Ian Patton,  
Operations Manager, or Brenda Underwood, Human Resources, at Bloomington Public Transportation Corporation  
130 West Grimes Lane, Bloomington IN 47403 Fax 812-332-3660 Phone 812-332-5688

# VOLUNTARY AFFIRMATIVE ACTION QUESTIONNAIRE

Bloomington Transit is attempting to gather data regarding its Affirmative Action/Equal Opportunity efforts under Section 503 of the Rehabilitation Act of 1973. Such information will enable BT to design affirmative action efforts that may be more successful than those currently used and to evaluate the success of the present program. The information on this form is strictly confidential and will not be matched with your application for employment. The information requested is voluntary and is used for statistical purposes only.

We consider applicants for all positions without regard to their race, ancestry, color, religion, sex, national origin, age, veteran status, sexual orientation or disability.

Date: \_\_\_\_\_ Position applied for: \_\_\_\_\_

Where did you learn of the job vacancy?

- Newspaper
- Employment Office
- Word of mouth
- Other \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Race:

- American Indian                      origins in North America, to exclude Alaska
- Asian                                        origins in Far East, S.E. Asia, India or Pacific Islands
- African American                        origins in Africa
- Hispanic                                    origins in Mexico, Puerto Rico, Cuba, Central or S. America
- Caucasian/White                        origins in Europe, North Africa or Middle East

Veterans/U.S. Military Status

- Non-Veteran
- Pre-Vietnam Veteran
- Pre-Vietnam Veteran with service incurred disability
- Vietnam Era Veteran (8-5-64 - 5-7-75)
- Vietnam Era Veteran with service incurred disability
- Post Vietnam Veteran
- Post Vietnam Veteran with service incurred disability

**BLOOMINGTON TRANSIT IS AN  
EQUAL OPPORTUNITY EMPLOYER**