General Instructions

Please read these instructions carefully.

- To be considered an applicant to Suburban Transportation and Affiliates (Suburban Transportation, Inc., Suburban Taxi, Inc., or Syracuse Regional Airport Taxi, Inc.), you must complete all parts of this application and sign the Applicant Statement. Incomplete Applications will not be considered. Please use additional sheets of paper if necessary to provide all the requested information. You may attach a resume; however, this application must still be completed.
- If you need help filling out this application, or for any phase of the employment process, please notify the person that gave you this form, and every reasonable effort will be made to accommodate your needs.

All qualified applicants will receive consideration without regard to race, color, creed, religion, gender, national origin, age, disability, marital status, veteran status, sexual orientation, or any other basis upon which discrimination is prohibited by municipal, state, or federal law.

Personal Information				
Last Name	First Name	Middle Name		
Phone (Cell)	Phone (Home)	Email		
Current Address – Street/Apt#	City	State Zip Code		
Current Address – Street/Apt#	City	State Zip Code		
If hired can you prove that you are	eligible for employment in the	Are you over the age of 18 years? (If no, you may be		
United States?		required to provide authorization to work.)		
□ No □ Yes		□ No □ Yes		
Is there any information we would need about your name for us to be				
able to check your work record? If	yes, explain:	☐ No		
		☐ Yes		
No Yes				
Position Information				
Position Desired:		Have you been previously employed by Suburban Transportation		
r oshron Beshed.		and Affiliates? No Yes		
		If yes, when? What Position?		
		Have you ever applied for employment with us?		
Full time Part time Temporary				
Overtime Evenings Weekends Holidays		No Yes If yes, month and year:		
When would you be able to start work?		Minimum acceptable		
		starting wage: \$ per (hour, week, etc.)		
What days/hours are you available to work? W		What made you apply at Suburban?		
		Employment Ad Current Employee Former Employee		
		Employment Agency School or College Walk-in/self		
		Other:		
Are you available to work overtime? Yes No If r		If referred by person, list name:		
If driving is a requirement of the jo				
do you have a current, valid NYS d	lriver's license? Yes	No		
		~		
NYS Drivers License ID#:	Licen	se Class:		
License Endersements	Lianna	e Restrictions:		
License Endorsements: License Re		E RESUICIOIIS.		

Employment History						
Begin with your most current of						
additional employers, please att	ach another			orma		ed for below.
1. Name of Employer		Location (Address, C	City, State, Zip)		Phone	
Date Started	Starting W	Jago	Starting Position	n Titl	0	Ending/Current Position Title
Date Started			Starting Fosition	11 1111	C	Ending/Current Fosition Title
	\$	per:houryear				
Date Left	Ending/Cu	Ending/Current Wage Superv		Supervisor Name & Title		Reason for Leaving
	\$	per: hour year	_			_
	Ψ	per				
Responsibilities:						t this employer? \[Yes \] No
				II no	o, explain:	
					1	
2. Name of Employer		Location (Address, C	City, State, Zip)		Phone	
Date Started	Starting V	Vage	Starting Positio	n Titl	<u> </u>	Ending/Current Position Title
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	\$	per: hour year				
Date Left	Ending/Cu	urrent Wage	Supervisor Nan	ne & '	Title	Reason for Leaving
	\$	per: hour year				
	Ψ					
Responsibilities:				-		t this employer? \[Yes \[No
				II no	o, explain:	
					1	
3. Name of Employer		Location (Address, C	City, State, Zip)		Phone	
Date Started	Starting V	Vage	Starting Positio	n Titl	e.	Ending/Current Position Title
Bute Started			Starting 1 obitio			Enough Content I obtain Title
	\$	per: hour year				
Date Left	Ending/C	urrent Wage	Supervisor Name &		Title	Reason for Leaving
	\$	per: hour year				
Responsibilities:		<u> </u>	•	Ma	y we conta	ct this employer? Yes No
				If r	no, explain:	
4. Name of Employer		Location (Address, C	City, State, Zip)		Phone	
		·	-			
	1					
Date Started	Starting V	Vage	Starting Positio	n Titl	e	Ending/Current Position Title
	\$	per: hour year				
Date Left	Ending/Ci	urrent Wage	Supervisor Nan	na & '	Titlo	Reason for Leaving
Date Left	_	•	Supervisor ivan	iic &	THIC	Reason for Leaving
	\$	per: hour year				
Responsibilities:				Ma	y we conta	ct this employer? Yes No
_					no, explain:	
				1		

Other History					
	om a position or otherwise asked to	Please describe any military service you had, including dates:			
resign? No Yes					
If yes, please explain:					
Education					
	School Name & Location	Degree Earned	Course of Study		
High School		None ☐ Diploma ☐ GED			
Business/Trade/Technical		□ None □ List:			
College		☐ None ☐ Associate ☐ Bachelor			
Graduate Studies		None Master Other			
Craduate Stadies		(explain)			
Training					
Have you ever had any drive	r training? No Yes If yes, plea	ase describe what and when:			
Have you ever had any safety	y training? No Yes If yes, ple	ase describe what and when?			
Special Skills					
Special Skills	aditations you passess that are not refle	poted alcoupage in this application (i.e. specia	Higansa computar		
Please list any skills or accre	editations you possess that are not refle	ected elsewhere in this application (i.e. special	l license, computer,		
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Please list any skills or accremechanical, etc.) Additional Information			l license, computer,		
Please list any skills or accremechanical, etc.) Additional Information			l license, computer,		

References		
Give name, address & telephon	e of three references that are not related to you	and are not previous employers.
Name	Address	Phone
1.		
2.		
3.		
	I	I
Applicant Statement		
T 10 1 1		
		knowledge. I realize that any misrepresentation in the n called for in this form may result in my immediate
does not obligate the company contingent upon receiving satis understand that if I receive a information necessary for recon	to offer employment, or the applicant to acceptactory background and reference checks as automingent offer of employment and I accept the	n and Affiliates is a preliminary step to employment. It ept employment. An offer of employment, if made, is thorized by this statement and any other attachments. I he position, I may be required to complete additional Il Company policies and procedures as outlined within
results must be satisfactory for Affiliates, my driving record w	employment to continue. If hired, I understand	require us to submit employees to a physical exam; the d that as an employee of Suburban Transportation and am found to have traffic convictions (including, but not y be terminated.
that may be relevant to my emp and Affiliates and/or its agents	loyment or my ability to perform the job for whi	m current and previous employers and other references ich I have applied. I authorize Suburban Transportation is application and other background information deemed oplying for, I authorize a driver's license check.
information concerning my back persons, schools, companies, ar information to the Company or	aground that may be relevant to evaluation of this and law enforcement authorities and agencies fro	law enforcement authorities and agencies to release any sis employment application and I hereby release any such an any liability for damages whatsoever for issuing this lates will keep all such information confidential except her authority, or by any contractual agreement.
I understand and hereby acknow	wledge that any employment relationship with S	Suburban Transportation and Affiliates is at will, which

Applicant Signature

means that, if I am hired, my employment with the Company is not for a fixed period of time and that I may resign at any time and Suburban Transportation and Affiliates may terminate my employment and compensation at any time. I further agree that this at will

employment relationship may not be changed by any written document or by conduct of any company employee or official.