



C&J Bus Lines

Employment
Application

C&J Bus Lines 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 _____
Date Available to start work _____	Salary Desired _____
	Part Time or Full Time _____

Personal

Last Name	First	Initial	Other Name(s) Used		
Current Address: _____					
Number	Street	City	State	Zip Code	
How many years: ____					
Previous Address: _____					
Number	Street	City	State	Zip Code	
How many years: ____					
Telephone Numbers Where We Can Contact You: Home: () Work/Other: ()					
Email address: _____					
Do you have friends or relatives who work for us? If so, please list their name(s).					

Are you over 18 years of age? Yes () No ()	
If no, and you are under 16 years of age, can you furnish a Youth Employment Certificate issued by a New Hampshire High School? Yes () No ()	
If no, and you are 16 or older, can you furnish a permission letter to work with this Company signed by your parent or legal guardian? Yes () No ()	
Are you legally eligible to work in the United States? Yes () No ()	
Have you ever been bonded? Yes () No () If so, with what employer(s)?	
Have you ever been refused a bond? Yes () No () If yes, please explain.	
Have you ever been convicted of a crime? Yes () No () If yes, please explain:	
(Please note that a criminal conviction will not necessarily prevent employment. Depending on the position, for which you are applying, any offer of employment may be conditioned upon your consent to and satisfactory results of a criminal background check.)	

Have you served in the Armed Forces? Yes () No ()	Branch: _____
Date Entered: _____	Date Discharged: _____

Education

	Name And Address Of School	Course Of Study	Years Completed	Diploma/Degree Awarded
High School				
Undergraduate College/University				
Graduate/ Professional				
Vocational Business, Other				

Other special knowledge, skills or qualifications related to the position(s) you are applying for:

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.

Employed From / /	Employer Name	Supervisor Name May we contact?	Starting Salary \$ Full time () Part time ()
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary \$ Full time () Part time ()
Job Title		Reason for Leaving	
Duties and Responsibilities			

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Duties and Responsibilities			

TO BE READ AND SIGNED BY APPLICANT

I certify that all the information on this application, and on my resume, if provided, 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.

I authorize you to make such investigations and inquiries of my personal, employment, financial, motor vehicle and/or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been made).

I hereby release employers, schools, healthcare providers and other persons from all liability in responding to inquiries and releasing information in connection with my application. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company. I understand that information I provide regarding current and/or previous employers may be used, and those employers will be contacted, for the purpose of investigating my safety performance history as required by 49 CFR 391.23 (d) and (e).

I understand I have the right to:

1. Review information provided by previous employers;
2. Have errors in the information corrected by previous employers and for those previous employers to resend the corrected information to the prospective employer; and
3. Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

In consideration for the processing of my application for employment with Jalbert Leasing Inc. d/b/a C&J Bus Lines, I hereby RELEASE, INDEMNIFY, AND HOLD HARMLESS Jalbert Leasing Inc. d/b/a C&J Bus Lines, and all previous employers and other persons and organizations furnishing information in connection with C&J Bus Lines' 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. A summary of your rights under the Fair Credit Reporting Act is also being provided to you and is available at www.consumerfinance.gov/learnmore.

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

Signature: _____ Date: _____

**THE BELOW DISCLOSURE AND AUTHORIZATION LANGUAGE IS FOR MANDATORY USE
BY ALL ACCOUNT HOLDERS**

**IMPORTANT
DISCLOSURE**

REGARDING BACKGROUND REPORTS FROM THE *PSP Online Service*

In connection with your application for the employment with **Jalbert Leasing Inc.**, (“Prospective Employer”), Prospective Employer, its employees, agents or contractors may obtain one or more reports regarding your driving, and safety inspection history from the Federal Motor Carrier Safety Administration (FMCSA).

When the application for employment is submitted in person, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer will provide you with a copy of the report upon which its decision was based and a written summary of your rights under the Fair Credit Reporting Act before taking any final adverse action. If any final adverse action is taken against you based upon your driving history or safety report, the Prospective Employer will notify you that the action has been taken and that the action was based in part or in whole on this report.

When the application for employment is submitted by mail, telephone, computer, or other similar means, if the Prospective Employer uses any information it obtains from FMCSA in a decision to not hire you or to make any other adverse employment decision regarding you, the Prospective Employer must provide you within three business days of taking adverse action oral, written or electronic notification: that adverse action has been taken based in whole or in part on information obtained from FMCSA; the name, address, and the toll free telephone number of FMCSA; that the FMCSA did not make the decision to take the adverse action and is unable to provide you the specific reasons why the adverse action was taken; and that you may, upon providing proper identification, request a free copy of the report and may dispute with the FMCSA the accuracy or completeness of any information or report. If you request a copy of a driver record from the Prospective Employer who procured the report, then, within 3 business days of receiving your request, together with proper identification, the Prospective Employer must send or provide to you a copy of your report and a summary of your rights under the Fair Credit Reporting Act.

Neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. You may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If you challenge crash or inspection information reported by a State, FMCSA cannot change or correct this data. Your request will be forwarded by the DataQs system to the appropriate State for adjudication.

Any crash or inspection in which you were involved will display on your PSP report. Since the PSP report does not report, or assign, or imply fault, it will include all Commercial Motor Vehicle (CMV) crashes where you were a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, all inspections, with or without violations, appear on the PSP report. State citations associated with Federal Motor Carrier Safety Regulations (FMCSR) violations that have been adjudicated by a court of law will also appear, and remain, on a PSP report.

The Prospective Employer cannot obtain background reports from FMCSA without your authorization.

AUTHORIZATION

If you agree that the Prospective Employer may obtain such background reports, please read the following and sign below:

I authorize **Jalbert Leasing Inc.**, (“Prospective Employer”) to access the FMCSA Pre-Employment Screening Program(PSP) system to seek information regarding my commercial driving safety record and information regarding my safety inspection history. I understand that I am authorizing the release of safety performance information including crash data from the previous five (5) years and inspection history from the previous three (3) years. I understand and acknowledge that this release of information may assist the Prospective Employer to make a determination regarding my suitability as an employee.

I further understand that neither the Prospective Employer nor the FMCSA contractor supplying the crash and safety information has the capability to correct any safety data that appears to be incorrect. I understand I may challenge the accuracy of the data by submitting a request to <https://dataqs.fmcsa.dot.gov>. If I challenge crash or inspection information reported by a State, FMCSA cannot change or correct this data. I understand my request will be forwarded by the DataQs system to the appropriate State for adjudication.

I understand that any crash or inspection in which I was involved will display on my PSP report. Since the PSP report does not report, or assign, or imply fault, I acknowledge it will include all CMV crashes where I was a driver or co-driver and where those crashes were reported to FMCSA, regardless of fault. Similarly, I understand all inspections, with or without violations, will appear on my PSP report, and State citations associated with FMCSR violations that have been adjudicated by a court of law will also appear, and remain, on my PSP report.

I have read the above Disclosure Regarding Background Reports provided to me by Prospective Employer and I understand that if I sign this Disclosure and Authorization, Prospective Employer may obtain a report of my crash and inspection history. I hereby authorize Prospective Employer and its employees, authorized agents, and/or affiliates to obtain the information authorized above.

Date: _____

Signature

Name (Please Print)

NOTICE: This form is made available to monthly account holders by NIC on behalf of the U.S. Department of Transportation, Federal Motor Carrier Safety Administration (FMCSA). Account holders are required by federal law to obtain an Applicant's written or electronic consent prior to accessing the Applicant's PSP report. Further, account holders are required by FMCSA to use the language contained in this Disclosure and Authorization form to obtain an Applicant's consent. The language must be used in whole, exactly as provided. Further, the language on this form must exist as one stand-alone document. The language may NOT be included with other consent forms or any other language.

NOTICE: The prospective employment concept referenced in this form contemplates the definition of "employee" contained at 49 C.F.R. 383.5.

LAST UPDATED 12/22/2015