



## Application For Employment

<b>Name of Facility &amp; Address:</b> <b style="text-align: center;">Ride-On Transportation</b> <b style="text-align: center;">3620 Sacramento Dr., Ste 201</b> <b style="text-align: center;">San Luis Obispo, Ca. 93401</b>	<b>Date</b>	<b>Facility File #</b>
---	-------------	------------------------

### 1. Personal Information

Name	Last	First	MI	Birth Date	Telephone #

### 2. Position Desired

Title	Salary	Hours	Available Date

### 3. Previous Employment (Most recent listed first, attach additional page if necessary)

Name, Address & Phone # of Employer	Job Title and Type of Work	Dates of Employment	
		From:	To:

### 4. Education

Circle Highest Year Completed	Date Completed	Diploma or Eqv Test	Currently Enrolled in H.S. Completion Courses
6 7 8 9 10 11 12			Y                      N
			If yes, expected completion date:

### Employment - Related Education Courses Completed

Course Title	Name of School or Organization & Location	# of Units Completed	Date Completed

### Employment - Related Education Currently Enrolled

Course Title	Name of School or Organization & Location	Number of Units Completed	Remarks

**4. Education (Continued)**

Name of University, College or Business School & Location	Major Subject	# of Years Completed	# of Units Completed	Diploma, Degree or Certificate	Date Completed

**5. References**

(list names of three persons who can give information about your background, character, abilities, etc.)

Name	Phone	Address	Nature of Acquaintance (Friend, Employer, etc.)

**6. Professional & Technical Qualifications**

**A. List Licenses or Certificates of Competence Held:**

**B. Name of Professional Organizations of Which You Are a Member:**

**7. Other Information**

**A. Briefly Describe Disabilities that might affect work:**

**B. Have you ever been convicted of an offense other than the following?**                    Y            N

1)     Minor traffic violation (fine was \$50.00 or less)

2)     Any offense settled in juvenile court under a welfare youth offender law  
(Offense which fall under 1 and 2 above need not report)

**If your answer to B or C is yes, provide the following information:**

Date	Location	Nature	Disposition

**Do you possess a valid California Driver License?**    Y            N

**Endorsements** \_\_\_\_\_ **Class** \_\_\_\_\_ **Date of Expiration:** \_\_\_\_\_

*I hereby certify that the above statements are true and give my permission for any necessary verification. I understand that UCP of San Luis Obispo County is an at-will employer.*

Signature: _____	Date: _____
------------------	-------------

NOTES: