



APPLICATION FOR EMPLOYMENT

Pre-employment questionnaire -- An Equal Opportunity Employer
1776 Main Street - P.O. Box #1776
Springfield, MA 01102-1776

- ARROW
- BONANZA
- BOSTON
- PETER PAN BUS LINES, INC.

(Answer all questions - Please Print)

In accordance with Federal and State equal opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, creed, ancestry, marital or veteran status, physical or mental disability or handicap, or any other legally prohibited status.

PERSONAL INFORMATION

Date of Application _____

Name _____
Last First Middle

Address _____
Street City State Zip Phone _____

Are you at least 18 years of age Yes No Are you prevented from LAWFULLY becoming employed in this country because of VISA or IMMIGRATION STATUS Yes No

Within the past five years have you ever been convicted of misdemeanor? Yes No

MASSACHUSETTS RESIDENTS DO NOT ANSWER

(Applicants may answer "no" with respect to a first conviction for drunkenness, simple assault, speeding, minor traffic violations, affraying or disturbance of peace.) If yes, please explain. An affirmative response will not necessarily disqualify you from employment.

Explanation _____

Have you ever been convicted of a felony? Yes No (See 'NOTE' on last page of application)

MASSACHUSETTS RESIDENTS DO NOT ANSWER

Have you ever been convicted of a misdemeanor? Yes No (See 'NOTE' on last page of application)

MASSACHUSETTS RESIDENTS DO NOT ANSWER

If yes, please explain. An affirmative response will not necessarily disqualify you from employment

Explanation _____

EMPLOYMENT DESIRED

Position _____ Date you can Start _____ Salary Desired _____

Are you employed now? Yes No If not, how long since leaving last employment: _____

If so, may we inquire of your present employer? Yes No

Have you worked for this company before? Yes No Where: _____

Dates: From _____ to _____ Rate of Pay _____ Position _____

Reason for Leaving: _____

Who referred you? _____

CIRCLE HIGHEST GRADE COMPLETED: 1 2 3 4 5 6 7 8 HIGH SCHOOL: 1 2 3 4 COLLEGE: 1 2 3 4
 LAST SCHOOL ATTENDED _____

name _____ city _____

GENERAL

Subjects of Special Study or Research work _____

Special Skills _____

Activities: (Civic, Athletic, etc.) (Exclude organizations, the name of which indicates race, creed, sex, age, marital status, color or nation of origin of it's members.) _____

U.S. Military Service Yes No Branch _____ From Date _____ To Date _____
 Rank at Discharge _____ Currently serve in National Guard or Reserves Yes No

FORMER EMPLOYERS

List below your last four employers, starting with your current (or last) one first. NOTE: You may include verifiable work performed on a volunteer basis.

EMPLOYER			DATE	
NAME			FROM MO.	TO MO.
ADDRESS			YR.	YR.
			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON	PHONE		REASON FOR LEAVING	

EMPLOYER			DATE	
NAME			FROM MO.	TO MO.
ADDRESS			YR.	YR.
			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON	PHONE		REASON FOR	

EMPLOYER			DATE	
NAME			FROM MO.	TO MO.
ADDRESS			YR.	YR.
			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON	PHONE		REASON FOR	

EMPLOYER			DATE	
NAME			FROM MO.	TO MO.
ADDRESS			YR.	YR.
			POSITION HELD	
CITY	STATE	ZIP	SALARY/WAGE	
CONTACT PERSON	PHONE		REASON FOR	

Which of these jobs did you like best? _____
 What did you like best about this job? _____

REFERENCES

Give the names of three persons not related to you, whom you have known at least one year

NAME	ADDRESS	BUSINESS	YRS KNOWN

In Maryland and Massachusetts it is unlawful to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

- In consideration of my employment, I agree to conform to the Company's rules and regulations and I agree that my employment and compensation can be terminated, with or without notice, at any time, at either my or the Company's option. I also understand and agree that the terms and conditions of my employment may be changed, without cause, and with or without notice, at any time by the Company. I understand that no Company representative, other than its President, and then only when in writing and signed by the President, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.
- I understand that any job offer made to me is pending the satisfactory outcome of a drug test ... Furthermore, depending upon the job title, a medical physical may also be required.
- I understand that if a conditional offer of employment is made, I will provide this Company with information required to be provided pursuant to federal regulations including, but not limited to, my date of birth and social security number.
- I understand that neither this application form, nor any other communication by Company representatives, written or oral, is intended in any way to create an employment contract binding on either party.
- I authorize this Company to make inquiry of any of my former employers or references as to my employment, compensation, experience job suitability, education, or reasons for leaving; and any inquiry to any other agency, institution, or person about any information provided by me in this my Application for Employment. Such inquiries may include my driving and criminal records. I grant permission to this Company to contact my present and past employers for information or a reference. I release any such source from any claim by me regarding information of a truthful nature that may be provided to this Company Information in violation of state or federal fair employment practice laws will not be sought or used by this Company.
- I certify that all information submitted by me on this application is true and complete and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

Signature of Applicant _____

Date of Application _____

Note: An applicant for employment with the Company in Massachusetts with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment with the Company in Massachusetts may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services, which did not result in a complaint transferred to the Massachusetts Superior Court for criminal prosecution.

Note: An applicant for employment with the Company in Connecticut is not required to disclose the existence of any arrest, criminal charge or conviction, where the records of which have been erased pursuant to Section 46b-146, 54-76o or 54-142a of the Connecticut General Statutes. Criminal records subject to erasure pursuant to Section 46b-146, 54-76o or 54-142a of the Connecticut General Statutes are records relating to a finding of a delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or *nolled*, a criminal charge for which the person was found not guilty or a conviction for which a person received an absolute pardon. Any person whose criminal records have been erased pursuant to Section 46b-146, 54-76o or 54-142a of the Connecticut General Statutes shall be deemed to have never been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

Remarks: _____

**Affirmative Action
Voluntary Information**

PETER PAN BUS LINES INC.
1776 MAIN STREET
SPRINGFIELD, MA 01103

Completion of information below is voluntary.

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is *not* a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

Please Print

Position(s) applied for _____ Date ____/____/____

Referral Source

- | | | |
|---|---|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Government Employment Agency | <input type="checkbox"/> Private Employment Agency |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Relative | <input type="checkbox"/> School |
| <input type="checkbox"/> Advertisement - Source _____ | | <input type="checkbox"/> Other _____ |

Name of person who referred you IF APPLICABLE _____

Applicant Information

Name _____ Telephone # (____) _____
Last First Middle

Address _____
Street City State Zip Code

- Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- | | | | |
|---|--|--------------------------------|---|
| <input type="checkbox"/> American Indian / Alaskan Native | <input type="checkbox"/> Hispanic / Latino (White race only) | <input type="checkbox"/> White | <input type="checkbox"/> Black / African American |
| <input type="checkbox"/> Native Hawaiian / Other Pacific Islander | <input type="checkbox"/> Hispanic / Latino (all other races) | <input type="checkbox"/> Asian | |

For Administrative Use Only

Position(s) applied for Available Not Available Other

Other positions considered for _____

Hired Yes No

Position hired for _____ Date of hire ____/____/____

From the EEO job classifications listed below, which one best describes the position filled?

- | | | |
|---|--|--|
| <input type="checkbox"/> Officials and Managers | <input type="checkbox"/> Sales Workers | <input type="checkbox"/> Operatives (semi-skilled) |
| <input type="checkbox"/> Professionals | <input type="checkbox"/> Office and Clerical Workers | <input type="checkbox"/> Laborers (unskilled) |
| <input type="checkbox"/> Technicians | <input type="checkbox"/> Craft Workers (skilled) | <input type="checkbox"/> Service Workers |

Notes _____

Completed by _____ Date ____/____/____