



Providing quality coordinated transportation and community service that meet the needs of the people we are entrusted to serve.

## Driver Applicants for Lassen Rural Bus

We are excited that you have taken time to consider a position with Paratransit Services. We are committed to providing a work environment that is positive and rewarding. Below you will find a partial list of the hiring requirements, wages and benefits information.

### Recruiting Requirements

Please follow all directions and complete the attached application in full. All applicants must provide a K-4 from the DMV; this is a 5 year driving history that you can get from the DMV. This report cost you \$5.00 at the DMV and is good for 30 days.

Driving applicants must meet the following minimum requirements (this is a partial list):

- At least 21 years of age
- Have a valid C driver’s license, with the ability to obtain a Class B with passenger endorsement.
- Able to pass a criminal background check
- Able to pass a DOT drug, alcohol and medical test
- Able to pass a motor vehicle records check

### Available Compensation & Benefits

**Starting Wage is \$17.34.**

**\$1,500.00\*** hiring Bonus for class C drivers and a

**\$2,000.00\*** hiring bonus for a class B with passenger endorsement or higher.

**\*Ask for details\***

**Full Time:**

403 B Retirement Plan

Medical

Dental

Vision

Life Insurance

Annual Leave

Holiday Pay

**Part Time**

403 B Retirement Plan

Employee Assistance Program

Flexible Shifts

**Contact Information**

Caleb Schortz

[cjs@paratransit.net](mailto:cjs@paratransit.net)

530-252-7433



**PARATRANSIT SERVICES**  
**POSITION DESCRIPTION**

**DATE:** April, 04 2022

**JOB TITLE:** Driver

**REPORTS TO:** General Manager or designee

**FLSA STATUS:** Non-Exempt

**DIVISION:** Operations

**LOCATION:** Various

**RESPONSIBILITIES:**

Operates small and large transit vehicles to ensure safe and timely transportation of passengers in a professional and courteous manner.

**DUTIES:**

1. Operates company vehicles to transport passengers on fixed route, demand/response or door-to-door service.
2. Assists dispatcher with routes and narratives.
3. Assists elderly passengers and persons with disabilities as required by the Americans with Disabilities Act, including the loading/unloading and securement of wheelchairs within established safety procedures. Physically evacuates passengers in any emergency situations.
4. Promotes positive passenger relations; greets passengers in a tactful, courteous manner.
5. Maintains appropriate uniform and presents a professional, neat and clean appearance.
6. Communicates access and/or loading problems to supervisors.
7. Inspects assigned vehicle before and after operations; makes notes of any defects discovered. Completes vehicle condition reports.
8. Completes passenger and vehicle usage records.
9. Keeps vehicle interior clean.
10. Prepares and submits Incident/Accident reports.
11. Responsible for keeping updated on all company policies and procedures, and all training requirements.
12. Perform other duties as required.

---

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

Print Name of Employee: \_\_\_\_\_

**PARATRANSIT SERVICES**  
**POSITION DESCRIPTION**

**SUPERVISES: N/A**

**PHYSICAL DEMANDS:**

Duties are performed while sitting for long periods of time in a motor vehicle. Duties also require periodic standing to assist passengers. Moderate lifting, bending, twisting and crouching may be required to assist passengers in boarding and exiting vehicle, including carrying packages and lifting wheelchairs weighing up to 50 lbs.; loading/unloading and pushing/pulling occupied wheelchairs without assistance (with assistance if there is more than one step). While driving, the employee may be exposed to hazards related to adverse weather conditions or vehicular traffic. Must be able to reach and stretch to do pre/post check of vehicle, adjust mirrors and operate radio and MDT. Must be able to operate small to large vans and buses.

**KNOWLEDGE AND ABILITIES:**

Knowledge of: basic customer relations techniques; the service area; the safe operations of vehicles and the applicable State Motor Vehicle Laws. Ability to: work with elderly and persons with disabilities, and deal tactfully and effectively with individuals of varying backgrounds in stressful situations; to promote good passenger relations; to prepare accurate records and reports; to communicate effectively, both orally and in writing; to read and apply written rules, regulations, policies and procedures; to pass required drug and alcohol testing.

**MINIMUM QUALIFICATIONS:**

Must be at least twenty-one years of age, have had a valid drivers license for at least five years and have the ability to obtain a CDL license as necessary for contractual requirements. Must be able to successfully pass a criminal background check, a motor vehicle records check, and pre-employment drug screening. Must have ability to obtain CPR/First Aid and Defensive Driving certification.

---

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

Print Name of Employee: \_\_\_\_\_



**APPLICATION FOR EMPLOYMENT**

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

Address \_\_\_\_\_  
Street City State Zip Code

\*\*\*(If you have lived at any other addresses in the last ten years, please attach the additional information.)

Telephone Number (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Position Applied For: \_\_\_\_\_  
(An application must be completed for each position applied for.)

Full-Time     Part-Time     Shift Work     On Call     Temporary

Date Available: \_\_\_\_\_ Location Preferred: \_\_\_\_\_

Referred By: \_\_\_\_\_

**GENERAL INFORMATION**

Are you legally eligible for employment in this country? .....  Yes  No  
(Proof of eligibility will be required upon employment.)

Are you at least 18 years old? .....  Yes  No

If you are applying for a Driver position, are you over age 21? .....  Yes  No

Do you have a valid driver's license? .....  Yes  No

Per the Americans with Disabilities Act (ADA), are you able to perform the tasks of the position you are applying for with or without an accommodation? .....  Yes  No

If you need accommodation, please indicate how you would perform the tasks and with what accommodation. \_\_\_\_\_

(You may request a copy of the position description or job announcement.)

**NOTE: Those applicants who receive a job offer will be required to undergo a comprehensive criminal background check and pre-employment drug test. Driver, Mechanic, and other driving-related positions will also require a motor vehicle records check.**

**Will you agree to consent to the requirements as described above?**     Yes     No

**10 YEAR EMPLOYMENT HISTORY**

Beginning with your present or most recent job, provide the following information about your employment record for the **previous 10 years**. If additional space is needed, continue with the same format on a separate sheet of paper. Explain any gaps in employment in the "APPLICANTS NOTES ON EMPLOYMENT" section that follows. Please complete the information thoroughly. **Please do not substitute a resume for this section.**

1. Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
 Summary of Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 May We Contact?  Yes  No

2. Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
 Summary of Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 May We Contact?  Yes  No

3. Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
 Summary of Duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for Leaving: \_\_\_\_\_  
 May We Contact?  Yes  No

**10 YEAR EMPLOYMENT HISTORY (cont.)**

4. Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Summary of Duties: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May We Contact?  Yes  No

5. Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Summary of Duties: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May We Contact?  Yes  No

6. Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Employed From: \_\_\_\_\_ To: \_\_\_\_\_

Summary of Duties: \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May We Contact?  Yes  No

**APPLICANT'S NOTES ON EMPLOYMENT**

Please explain any gaps in employment record: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SPECIAL QUALIFICATIONS AND SKILLS**

List special skills and abilities which you acquired through employment or other experiences that relate to the position for which you are applying, such as typing and computer experience as well as licenses, craft cards, equipment operated, etc.: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

Circle the highest grade completed: 9 - 10 - 11 - 12 - 13 - 14 - 15 - 16 - 17 - 18 Other \_\_\_\_\_

Type of School	Name	City/State	Graduated Y/N	Major Subject	Degree Earned
High School					
College					
College					
Other					

<b>ADDITIONAL INFORMATION</b>
-------------------------------

**Driver, Mechanic or Maintenance applicants, please complete the following:**

**Driving Record**

1. Do you possess more than one driver's license?      Yes     No  
If yes, please explain \_\_\_\_\_  
\_\_\_\_\_
  
2. Have you ever had your license revoked, suspended, canceled or been disqualified from obtaining a commercial license?    Yes     No    If yes, please explain \_\_\_\_\_  
\_\_\_\_\_
  
3. Have you ever been convicted of any traffic violations anywhere? (With exception of parking)    Yes     No    If yes, please explain \_\_\_\_\_  
\_\_\_\_\_
  
4. Have you ever been employed as a commercial motor vehicle operator within the preceding 10 years?  
 Yes     No    If yes, please explain \_\_\_\_\_  
\_\_\_\_\_
  
5. List all traffic arrests, convictions, bond forfeitures, citations, license suspensions and accidents in the past three (3) years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>PLEASE READ AND SIGN BELOW. THIS APPLICATION IS NOT COMPLETE WITHOUT YOUR SIGNATURE</b>
--

I certify that all information on this application is true and correct. I am aware that any misrepresentation or omission may preclude an employment offer, or may result in withdrawal of an employment offer or separation of employment. I further understand that this is an application for employment and that no employment contract is being offered. I also understand that employment with Paratransit Services is **at will**, and the employment relationship may be ended by either party, at any time, with or without notice.

I authorize Paratransit Services to investigate my work performance with my references and with my previous employers, (except as noted), and to investigate other such records, (e.g., motor operator records, criminal records, etc.), pertinent to the job for which I have applied. I hereby release from liability Paratransit Services and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.

I understand that any offer of employment will be contingent on taking and passing any physical examinations, including drug and alcohol screenings, and other tests/evaluation, etc. that may be required to certify my suitability for the work I have applied for and I release Paratransit Services and its representatives for any legitimate actions it takes relating to the results of such tests. I also understand that refusal to submit to the drug screening will constitute voluntary withdrawal of my application for employment.

If I become employed, I also agree to such physical examinations, including drug and alcohol screenings, if they are warranted by the position, federal and/or state regulations or Paratransit Services Drug and Alcohol Policy. I further agree to hold Paratransit Services harmless for the consequences of such examinations, screenings, etc.

Paratransit Services is an Equal Opportunity Employer and considers all applicants, for all positions, without regard to race, color, gender, national origin, age, marital status, veteran status, disability or any other legally protected status.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_





**APPLICANT EEO DATA SURVEY**  
(Completion of the Information Below is Voluntary)

As an Equal Employment Opportunity (EEO) employer, Paratransit Services complies with applicable EEO regulations. We consider all applicants, for all positions, without regard to race, color, religion, gender, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

The purpose for this Data Survey is to compile gender, ethnicity, disabling conditions and veteran status of all applicants for equal employment opportunity purposes. If an applicant elects not to respond to this questionnaire, his/her individual EEO categories will be based on the best information available. This data is not part of your official application for employment. It is considered confidential information that will not be used in any hiring decision.

NAME \_\_\_\_\_  
Last First MI

Position(s) Applied For \_\_\_\_\_

Name of organization or person who referred you \_\_\_\_\_

Your association or relationship to referral source \_\_\_\_\_

Check one:  Male  Female Date of Birth \_\_\_\_\_  
Month Day Year

Check the following categories that apply:

- White  Black  Asian/Pacific Islander
- Hispanic  American Indian/Alaskan Native
- Vietnam Era Veteran  Disabled Veteran  Handicapped Individual

For EEO purposes, a Vietnam Era Veteran is a person (a) who (i) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964 and May 5, 1975, and was discharged or released there from with other than a dishonorable discharged, or (ii) was discharged or released from active duty for a service-connected disability if any part of such active duty was performed between August 5, 1964 and May 5, 1975, and (b) who was so discharged or released within the 48 months preceding that person's application for employment.

Disabled Veteran refers to a person entitled to disability compensation under laws administered by the Veterans Administration for disability rated at 30 percent or more, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

A Handicapped person, as defined in Section 503 of the Rehabilitation Act of 1973, is one who:  
(1) has a physical or mental impairment which substantially limits one or more major life activity;  
(2) has a record of such impairment;  
(3) is regarded as having such an impairment.