EMPLOYMENT APPLICATION

Catalina Transportation Services, Inc. dba Catalina Taxi & Tours & Catalina Auto Services
228 METROPOLE AVENUE
PO BOX 2141, AVALON, CA 90704
310-510-0342



Applications are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

PERSONAL IN							
Date	Date Available to Start:						
Position applying	g for (check all that apply): (All drivers must be a minimum of 25 years of age)						
∃ Full-Time Taxi	Driver □ Part-Time Taxi Driver						
	☐ Full-Time Taxi Dirver ☐ Part-Time Taxi Dirver ☐ On call Dispatcher						
∃ Full-Time Gara							
□ I un-Time Gara □ On call Tour/Sh							
	e Part-Time office						
	Seasonal Dispatcher						
	iver/Special events and/or busy holiday weeks						
On can Taxi Di	ivel/special events and/of busy horiday weeks						
U.S. Citizen □ Ye	s \square No If not a U.S. citizen do you have paperwork stating you are able to work in the U.S. \square Yes \square No						
Name: Street Address:							
City/State/Zip:							
Email address:	Phone No.:						
zinan adaress.	I Holle 1 to						
	en convicted of or charged with a felony or misdemeanor: \Box Yes \Box No If yes, please explain details in full,						
	en convicted of or charged with a felony or misdemeanor: Yes No If yes, please explain details in full, etails of offenses(s) charged, jurisdiction and disposition of case:						
ncluding dates, d	etails of offenses(s) charged, jurisdiction and disposition of case:						
EDUCATION:	etails of offenses(s) charged, jurisdiction and disposition of case:						
EDUCATION: School/Colleges A	etails of offenses(s) charged, jurisdiction and disposition of case:						
EDUCATION: School/Colleges A	Attended: #Years Year Graduated Degree #IT/WORK EXPERIENCE: Start with your present or most recent position. Include military service						
EMPLOYMEN assignments and v	Attended: #Years Year Graduated Degree #IT/WORK EXPERIENCE: Start with your present or most recent position. Include military service rolunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin. Phone:						
EMPLOYMEN assignments and v Employer:	Attended: #Years Year Graduated Degree #T/WORK EXPERIENCE: Start with your present or most recent position. Include military service rolunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin.						
EMPLOYMEN assignments and v Employer: Tob Title: Street Address:	Attended: #Years Year Graduated Degree #IT/WORK EXPERIENCE: Start with your present or most recent position. Include military service rolunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin. Phone:						
EMPLOYMEN assignments and v Employer: fob Title: Street Address: City/State/Zip:	Attended: #Years Year Graduated Degree #IT/WORK EXPERIENCE: Start with your present or most recent position. Include military service rolunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin. Phone:						
EMPLOYMEN assignments and v Employer: Job Title: Street Address: City/State/Zip: Describe Duties/F	Attended: #Years Year Graduated Degree Attended: #Years Year Graduated Degree AT/WORK EXPERIENCE: Start with your present or most recent position. Include military service rolunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin. Phone: Supervisor: Responsibilities/Accomplishments:						
EDUCATION: School/Colleges A EMPLOYMEN assignments and v Employer: Job Title: Street Address: City/State/Zip: Describe Duties/R Reason for Leavin	Attended: #Years Year Graduated Degree Attended: #Years Year Graduated Degree AT/WORK EXPERIENCE: Start with your present or most recent position. Include military service rolunteer activities. Exclude organization names that indicate race, color, religion, sex or national origin. Phone: Supervisor: Responsibilities/Accomplishments:						

EMPLOYMENT/WORK EXPERIENCE CONTINUED

Employer:	Phone:Supervisor:				
Job Title: Street Address:					
City/State/Zip: Describe Duties/R					
Reason for Leavin	ng: nent (Month/Year): From	То	Data of Day (Start)	(End)	
Dates of Employi	nent (Month/Tear). 110111	10	Rate of Fay (Start)	(Elid)	
EMERGENCY	CONTACT:				
Name/Phone No: Relationship:					
REFERENCES	Please provide names, addre	ess, phone numbers, relati	onship and how long known fo	or 3 personal references.	
Name/Phone No: Relationship:					
Street Address: How long:					
City/State/Zip:		Phone:			
Name/Phone No: Relationship:					
Street Address:					
How long: City/State/Zip:					
Name/Phone No:					
Relationship: Street Address:					
How long:					
City/State/Zip:		Phone:			
SPECIAL SKII	LLS: Describe any special ski	lls, certificates or qualific	eations for this work:		
contained in this applicagreement. In the even	cove answers are true and complete to to cation as necessary to determine my quent of employment, I understand that any mination. I understand also, that I am	alifications. I understand that to y false or misleading information	his application is not and is not intende on given in my application, corresponde	ed to be any kind of contract or ence, discussions or interview may	
				_	
FOR CATALIN	NA TRANSPORTATION S	SERVICES INC. USE	CONLY:		
Arrange Interview	v:	Place:			
Remarks:					
Approved: Yes	□ No Date:	By:			