

APPLICANT'S AUTHORIZATION, CERTIFICATION AND AGREEMENT

1. I understand that as a result of this application for employment an investigative consumer report may be prepared whereby information may be obtained through personal interviews with my neighbors, friends or other acquaintances. Such an inquiry would include information as to character, general reputation, personal characteristics and mode of living. I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation.

2. I authorize the references listed in this application and any prior employer, educational institution, or other persons or organizations with whom Yates Dial-A-Ride ("Agency") wishes to check to give the Agency any information concerning my previous employment, educational accomplishments, or disciplinary record, or any other pertinent information they may have, personal or otherwise, and I authorize the Agency to request such information. I understand that such information may contain my Social Security Number. I release the Agency and all parties providing information from any liability for damage that may result from requesting such information or providing such information to the Agency. I also waive any notice that information is being provided to the Agency by any person or organization.

3. I authorize the Agency to obtain criminal conviction and felony arrest information and driving record information from the appropriate law enforcement agency or other applicable agency should the Agency determine it is necessary to do so.

4. If conditionally offered employment, I agree to submit to any psychological or physical testing or examination that may be necessary to determine my ability to perform the job for which I am being considered. I also authorize any medical provider conducting such examination or in possession of any medical reports or records pertaining to me to release the results of such examination or such record or report to the Agency.

5. I give my consent for the Agency, through an authorized testing service of its choice, to collect blood, urine, hair or saliva samples, or other fluid or tissue samples, from me and to conduct any other necessary medical tests to determine the presence of alcohol, drugs or controlled substances, and I release the Agency from any liability for damage arising out of such test or its results. I also consent to the release of the test results and other relevant medical information to authorized Agency management personnel for appropriate review. If I am accepted for employment with the Agency, I consent to be tested in the above manner during my employment when required by federal, state or local law, business necessity, Agency policy, or a reasonable suspicion of drug or alcohol use, and I acknowledge that remaining free of illegal and improper drug and alcohol use is a condition of my employment.

6. If I am hired by the Agency, in consideration of my employment I agree to comply with all policies and rules of the Agency, and I understand that my employment is "at will" and can be terminated with or without cause and with or without notice at any time by either me or the Agency, regardless of any contrary provisions in any other documents. This application does not constitute an agreement for employment for any specified period of time. I understand that no representative of the Agency other than its Executive Director has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing, and that any such agreement must be in writing and signed by me and the Executive Director.

7. I certify that the information I have provided in this application and any supplemental documents is true and correct and complete to the best of my knowledge, and that I have not withheld any fact or circumstance that would, if disclosed, affect my application unfavorably. I understand that any misrepresentation, deception, omission or false statement made in connection with this application may result in my not being further considered for employment, and if not discovered by the Agency until after my becoming employed, may result in my immediate termination.

8. I understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States, and that federal immigration laws require me to complete the I-9 form in this regard.

9. I understand that this application will be considered active pursuant to the Agency's normal procedures for a period of 45 days. If I am still interested in employment thereafter, I must reapply.