

Nevada County Transportation Commission – Transportation Planner

An Equal Opportunity Employer

Employment Application

Application deadline: July 8, 2019 at 5:00 pm. See Job Announcement for details.

Today's Date

Last Name

First Name

Middle

Present Address

Street Address

City

State

Zip Code

Permanent Address (if different from present address)

Street Address

City

State

Zip Code

Business Phone

Home Phone

Email Address

If hired, can you produce documentation of U.S. Citizenship or Legal Work Permits to comply with the Immigration and Naturalization Act? Yes No

If hired, what date can you start work? _____

Personal Information

If hired, would you have a reliable means of transportation to and from work? Yes No

California Driver's License No. _____ Class _____ Expiration Date: _____

(An acceptable driving record may be required prior to employment. You may be required to use your own vehicle in the course of NCTC business.)

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed _____

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.

Education, Training, and Experience

School	Name and Address	No. of Years Completed	Did you Graduate?	Degree or Diploma and Major
High School	<hr/> Name <hr/> Address <hr/> City, State, Zip Code	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
College/University	<hr/> Name <hr/> Address <hr/> City, State, Zip Code	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
College/University	<hr/> Name <hr/> Address <hr/> City, State, Zip Code	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>
College/University	<hr/> Name <hr/> Address <hr/> City, State, Zip Code	<hr/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<hr/>

For the questions below, if more space is needed please attach separate sheet.

Describe your level of proficiency in Microsoft Word, Excel and Outlook _____

List other pertinent software programs you are familiar with and describe your level of proficiency _____

List any other experience, training, qualifications, or skills that you feel make you especially suited for the Transportation Planner position _____

References

List below three persons not related to you who have knowledge of your work performance.

First Name	Last Name	Phone Number / Email
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Street Address, City, State, Zip Code

Relationship to Applicant	No. of Years Acquainted
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First Name	Last Name	Phone Number / Email
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Street Address, City, State, Zip Code

Relationship to Applicant	No. of Years Acquainted
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First Name	Last Name	Phone Number / Email
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Street Address, City, State, Zip Code

Relationship to Applicant	No. of Years Acquainted
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Please Read Carefully, Initial Each Paragraph and Sign Below

I authorize the employers, educational institutions and references listed to give you any information concerning my previous employment, education and any pertinent information they may have. I release all parties from liability for any damages that may result from furnishing same to Nevada County Transportation Commission.

Initials

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials

I hereby authorize Nevada County Transportation Commission to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

Initials

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

Initials

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Initials

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

I certify that all statements made in this application are true and complete, and that any misstatement of material facts may subject me to disqualification or dismissal.

Date

Applicant's Signature

APPLICATIONS ARE ACCEPTED BY EMAIL ONLY

Email Application, Supplemental Questionnaire, Cover Letter, Resume, Letters of Recommendation, and Transcripts and/or Certificates to dlandon@nccn.net

Transportation Planner Supplemental Questionnaire

Attach a separate sheet if needed.

Describe your experience performing financial analysis, grants administration, transportation planning, or transportation policy analysis or development.

Describe your work experience with performance-based transportation planning efforts.

Describe your work experience on grant applications for planning and/or funding for a transportation project.

Describe your work experience preparing and presenting planning study recommendations to policy boards, advisory committees, and community stakeholders.
