



## **CSR (Customer Service Representative) Applicants**

Applicants should have a good working ability with Word, Excel, Microsoft Explorer and Outlook Express. You must be able to clearly and pleasantly communicate with our customers over the phone while placing reservations on the computer and in person. Good English and diction skills are required.

We have multiple shifts per day. The office opens at 6:00am and closes at 11:00pm. We are open 7 days a week, 361 days per year. We have shifts that are two to five days a week.

Interested applicants should fill out an application and attach a brief resume. These should be delivered to our office at 1751 N.E. Goldie St, Suite A in Oak Harbor.

**We are a DRUG FREE company and all employees are subject to pre-employment and random testing.**

PO BOX 2895  
Oak Harbor, WA 98277  
(360) 679-4003 Fax (360) 323-8894  
[info@seatacshuttle.com](mailto:info@seatacshuttle.com)

DATE: \_\_\_\_\_

## APPLICATION FOR EMPLOYMENT Customer Service Representative

APPLICANT'S NAME: \_\_\_\_\_  
(First) (Middle) (Maiden Name, if any) (Last)

ADDRESS: \_\_\_\_\_ HOW LONG?: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

HOME PHONE # (\_\_\_\_\_) \_\_\_\_\_ CELL PHONE #(\_\_\_\_\_) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ May we contact your current employer? \_\_\_\_\_

Are you looking for Full Time \_\_\_\_\_ or Part Time \_\_\_\_\_ When can you start? \_\_\_\_\_

Do you have any days of the week or hours that you are not available? \_\_\_\_\_ When? \_\_\_\_\_

Do you have any vacations or other time off requirements scheduled with in the next six months? \_\_\_\_\_

### *PAST ADDRESSES (for the past 5 years)*

|   | STREET | CITY | STATE & ZIP<br>CODE | HOW LONG? |
|---|--------|------|---------------------|-----------|
| 1 |        |      |                     |           |
| 2 |        |      |                     |           |
| 3 |        |      |                     |           |
| 4 |        |      |                     |           |

During the past 5 years, have you ever been convicted of, pled guilty to or pled no contest to any crime, excluding misdemeanors and traffic violations? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you or have you been a sex offender registered with any federal, state or local government agency, including any listing on a public website? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes \_\_\_\_\_ No \_\_\_\_\_

Have any license, permit or privilege ever been suspended or revoked? Yes \_\_\_\_\_ No \_\_\_\_\_

Answering yes will not necessarily bar you from employment. Applicants are not required to disclose sealed or expunged conviction records or the existence of such records.

If The Answer To Either Question Is Yes, Attach a Statement Giving Full Details.

**EMPLOYMENT RECORD**  
**(ATTACH SHEET IF MORE SPACE IS NEEDED)**

**Note: DOT requires all that employment or gaps in employment for the last 5 years**

Employer Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone # (\_\_\_\_\_) \_\_\_\_\_ Position Held: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone # (\_\_\_\_\_) \_\_\_\_\_ Position Held: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone # (\_\_\_\_\_) \_\_\_\_\_ Position Held: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone # (\_\_\_\_\_) \_\_\_\_\_ Position Held: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

**U.S Military**

Branch of Service: \_\_\_\_\_ Date Entered: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_

Highest Rank/Rate: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

**Computer Skills**

|                 | None                     | Some                     | Intermediate             | Advanced                 |
|-----------------|--------------------------|--------------------------|--------------------------|--------------------------|
| MS2000/XP/Vista | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Word            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Excel           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outlook         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outlook Express | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Typing (WPM): \_\_\_\_\_

**Please answer the following questions, if you need more space please attach an additional sheet.**

1. Please describe your previous work experience in dealing with the general public.

---

---

---

---

---

2. Please provide a specific example how you were able to demonstrate excellent customer service.

---

---

---

---

---

3. Please describe your office skills that makes you especially qualified for this position.

---

---

---

---

---

4. How long have you applied these skills in the workplace?

---

---

---

---

---

**EDUCATION HISTORY**  
**(ATTACH SHEET IF MORE SPACE IS NEEDED)**

Name and Location of last High School Attended: \_\_\_\_\_

Are you a High School Graduate? \_\_\_\_\_ Month and Year Graduated \_\_\_\_\_

Do you have a GED? \_\_\_\_\_ Highest grade completed if not \_\_\_\_\_

**College or University**

| Name and address of school | Dates Attended | Type Degree and Major | Year of Degree |
|----------------------------|----------------|-----------------------|----------------|
|                            |                |                       |                |
|                            |                |                       |                |
|                            |                |                       |                |

**Other Schools or Training**

| Name and address of school | Dates Attended | Area of Study | Completed? |
|----------------------------|----------------|---------------|------------|
|                            |                |               |            |
|                            |                |               |            |
|                            |                |               |            |

**TO BE READ AND SIGNED BY APPLICANT**

I certify that I have read this application and the information on it is complete and correct. I understand that any omissions or misrepresentation of information is grounds for dismissal. I authorize that persons, employers, schools, and organizations listed on this application to give you any information concerning my employment and other pertinent information they may have, personal and otherwise, and release all parties from all liability and damages that may result from furnishing this to you. I acknowledge that Whidbey Sea-Tac Shuttle reserves the right to amend or modify any of its handbooks or policies at any time and without prior notice. These policies do not create any promises or contractual rights between this employer and its employees. Employment is at will, this means an employee is free to terminate his/her employment at any time, without any reason, with or without cause, and we retain the same rights. Whidbey Sea-Tac Shuttle is an Equal Opportunity Employer. Various federal, state, and local laws prohibit discrimination on account of race, color, sex, age, national origin, disability or veterans status, or other categories protected by law. It is our policy to comply fully with these laws, as applicable and information requested on this application will not be used for any prohibited by law. I understand that as a part of the procedure for my employment application an investigative consumer report may be made concerning my character, general reputation, personal characteristics and mode of living. Upon written request, additional disclosure concerning the complete nature and scope of the investigation will be provided. If I am denied a job based either wholly or in part because of information contained in an investigative consumer report, I will be provided the name and the address of the reporting agency that supplies the information.

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Applicant's Signature)



## Drugs and Alcohol Policy

Whidbey SeaTac Shuttle is a drug and alcohol free workplace. All applicants selected for hire will be subject to pre-employment drug testing. You will be required to pay for the test at the time of testing. If the results are negative (no drugs present) you will be reimbursed for the cost of the test. All employees are subject to random, post accident, and reasonable suspicion drug and alcohol testing. If at any time you use prescribed medications or over-the-counter drugs that may affect cognition, motor skills or in that any way may affect your ability to operate safely, you must report it to dispatch or operations. Complete details of Whidbey-SeaTac Shuttle's drug and alcohol policy are available at the Whidbey-SeaTac Shuttle office in Oak Harbor.

I have read and understand the above.

---

Signature

---

Print Name

---

Date



## New Hire Program for CSR/Dispatch The Interview, Evaluation, & Training.

The program for candidates involves an intensive, multi-step process. If hired and trained, you are obligated to make a commitment to remain with the company for a minimum of 6 months, unless terminated for any reason. The training that we provide is valuable and very time consuming for all parties concerned. If you leave before six months from the date of completion of training you agree to a fee of \$250.00, which will be held from your final pay check. If your check is insufficient to cover the \$250.00 you agree to pay the difference within seven day.

**Step One: The interview:** At the interview you will need a resume and completed application. We will discuss your background, the work schedule and pay. The application process and training will be explained in detail at this time.

**Step Two: Ride-along:** To be sure that this job is for you and to understand what services we provide, you will be required to ride along to and from the airport in one of our shuttles on one of our regularly scheduled trips. This is your chance to understand the procedures involved for each stop and at Seatac International Airport. This is on your own time and will not be paid, but is required.

**Step Three: System Overview:** During this three to four hour training session, you will be learning about our computer network and reservation system, along with other related office procedures. This is your second opportunity to decide if this job will be right for you and if you choose to continue your training and is not paid.

**Step Four: Drug test & Documentation:** At this point, you will turn in your employment packet and take a pre-employment drug test. This is on your time and is a prerequisite of being hired.

**Step Five: Training sessions:** Four training sessions of four hours each will be scheduled. These will cover all aspects of the reservation and dispatch procedures. You will be taking phone calls and preparing relative paperwork under direct supervision. Your training session times will vary for the opportunity to observe different aspects of company operations. Upon completion of this training you should be able to conduct your duties unsupervised. These sessions are paid at the current training rate.

**Step Six: Probation:** During the next sixty days you have a chance to evaluate us as we will be evaluating your performance. Upon successful completion of probation your rate of pay will increase.

\_\_\_\_\_  
Candidates Signature

\_\_\_\_\_  
Date

# OFFICE USE ONLY

Date Reviewed: \_\_\_\_\_ by: \_\_\_\_\_ Continue: Yes / No

Called for interview: \_\_\_\_\_  
Date Time by Results

Interview scheduled: \_\_\_\_\_  
Date Time with

Admin typing test completed: \_\_\_\_\_  
Date Time by Results

Cleared to continue: Yes / No by: \_\_\_\_\_

Background check completed: \_\_\_\_\_  
Date by

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(Include your name after comments)

OK to Hire: Yes / No by: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Training completed: \_\_\_\_\_ Signed off by: \_\_\_\_\_  
Date

Policy and Procedures: \_\_\_\_\_ By: \_\_\_\_\_  
Date

Drug test results reviewed by: \_\_\_\_\_  
Date

Personnel file completed and reviewed: \_\_\_\_\_ by: \_\_\_\_\_ Date

Probation Complete Interview: \_\_\_\_\_ by: \_\_\_\_\_  
Date

Probation Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
(Include your name after comments)