



Scranton School District

"Home of the Rockets"



103 North 10th Street
 Scranton, AR 72863
 Phone (479) 938-7121
 FAX (479) 938-7564

BUS DRIVER APPLICATION

Name _____ Social Security Number _____

Current Address _____

Phone Number _____ Date of Birth _____

Present Occupation _____ Service Classification _____

Do you have any physical impairments? _____ (If so, explain on back of application.)

Years of formal education: _____ Elementary _____ High School _____ College

Current Driver License: _____ Regular _____ Chauffeur _____ Other

Driver License Number: _____ Expiration _____ State _____

Experience driving at least 1 1/2 ton vehicles: _____ years _____ months

Have you had any type of vehicle accident in the last three (3) years? _____

If so, give approximate dates: _____

Arrested for a moving traffic violation in the last three (3) years? _____

If so, give approximate dates: _____

Has your driver's license ever been suspended or revoked? _____

If so, give approximate dates: _____

Do you use intoxicants? _____ If so, to what degree? _____

Do you use drugs? _____ If so, to what degree? _____

If selected as a bus driver, are you willing to subordinate yourself to the school's policies pursuant to school bus driving? _____

REFERENCES:(Do not use relatives. Include at least one business person and one professional person.)

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Occupation</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Scranton School District is an equal opportunity educational and employment institution. The law protects the rights for an equal employment opportunity regardless of race, religious creed, national origin, ancestry, physical handicap, sex, or age.

To the best of my knowledge, answers to the above are complete and correct.

Signature

Date