

**SOUTH RANGE LOCAL SCHOOLS
OFFICE OF THE SUPERINTENDENT
11375 COLUMBIANA-CANFIELD RD.
CANFIELD, OH 44406
PHONE: 330-549-4086
FAX: 330549-4746**

Brenda Hammond- Transportation Supervisor

Bus Driver Application

Personal Information

Full Name _____

Address _____
Number Street City State Zip

How long have you lived here? _____

Home phone _____ Cell phone _____

Birth date _____ Height _____ Weight _____

Condition of your health _____ Eyesight _____ Hearing _____

Any physical defects that would prohibit you from carrying out duties or passing annual bus driver physical exam:

Eyesight _____ Hearing _____

Single _____ Married _____ Separated _____ Widowed _____

Number of Children _____ Their ages _____

High School attended _____ Graduation date _____

College Attended _____ Graduation date _____

**ANY PERSON WHO KNOWINGLY MAKES A FALSE STATEMENT IS
GUILTY OF FALSIFICATION UNDER SECTION 2921.13 OF THE REVISED
CODE, WHICH IS A MISDEMEANER OF THE FIRST DEGREE.**

Work History

Starting with your most recent job, please list places you have worked in reverse order.

<u>Dates of Employment</u>	<u>Type of work done</u>	<u>Company name and location</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Driving experience

Number of years experience driving: Car _____ Truck _____ Bus _____

Drivers License Number _____ Is this a CDL? _____

If CDL is "YES," what endorsements do you have? _____

If CDL is "YES," for whom have you driven in the last two (2) years?

If "YES," Federal Law requires applicant to complete an information release form that must be sent to all previous employers from the last two (2) years.

Have you ever been involved in a traffic accident? _____ Nature? _____

Has your Driver's License ever been revoked, suspended, or withdrawn? _____

Have you ever been arrested for violating any traffic laws? _____

Have you ever been convicted of a felony? _____

Have you attended the Ohio Dept. of Education School Bus Training Course? _____

References: *Complete the following for three persons who are not related to you by blood or marriage who will give character references.*

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

I certify that the information supplied on this application is correct.

Signature _____
Date