

**DRIVER EMPLOYMENT APPLICATION**  
**CANDOR CENTRAL SCHOOL DISTRICT**  
**TRANSPORTATION DEPARTMENT**  
**PO BOX 145**  
**163 SPENCER ROAD**  
**CANDOR, NY 13743**  
**607-659-3115**  
[hcarling@candorcs.org](mailto:hcarling@candorcs.org)  
*An Equal Opportunity Employer*

COMPLETE IN FULL OR IT WILL NOT BE CONSIDERED. **DATE OF APPLICATION** \_\_\_\_\_

APPLICANT INFORMATION		
<b>FIRST NAME</b>	<b>MIDDLE NAME</b>	<b>LAST NAME</b>
<b>PHONE</b>	<b>EMAIL</b>	<b>DATE OF BIRTH</b>
<b>POSITION APPLIED FOR</b>	<b>DATE AVAILABLE FOR WORK</b>	<b>SOCIAL SECURITY NUMBER</b>

Do you have a legal right to work in the United States?  YES  NO

PREVIOUS THREE YEARS RESIDENCY					
	STREET	CITY	STATE	ZIP CODE	# OF YEARS AT ADDRESS
CURRENT					
MAILING					
PREVIOUS					
PREVIOUS					
PREVIOUS					

LICENSE INFORMATION				
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STATE	LICENSE #	TYPE/CLASS	ENDORSEMENTS	EXPIRATION DATE

## ACCIDENT RECORD FOR THE PAST THREE (3) YEARS

Attach an additional sheet if more space is needed.

Check this box if none

DATE (List most recent first)	NATURE OF ACCIDENT (Head-on, rear-end, upset, etc.)	# of Fatalities	# of Injuries	WHOSE FAULT

## TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST THREE (3) YEARS (OTHER THAN PARKING VIOLATIONS)

Attach an additional sheet if more space is needed.

Check this box if none

DATE CONVICTED (Month/Year)	VIOLATION	STATE OF VIOLATION	PENALTY (# OF POINTS)

Have you ever been denied a license, permit, or privilege to operate a motor vehicle?  YES  NO

If yes, explain

Has any license, permit, or privilege ever been suspended or revoked?  YES  NO

If yes, explain

## EMPLOYMENT HISTORY

All applicants wishing to drive a commercial vehicle list all employment for the last three (3) years. In addition, if you have driven a commercial vehicle previously, you must provide employment history for an additional seven (7) years (for a total of ten (10) years). Any gaps in employment in excess of one (1) month must be explained. Start with the last or current position, including any military experience, and work backwards (attach separate sheets if necessary). You are required to list the complete mailing address, including street number, city, state, zip; and complete all other information.

**CURRENT (MOST RECENT) EMPLOYER**

NAME		PHONE	
ADDRESS			
POSITION HELD		FROM MO/YR TO MO/YR	
REASON FOR LEAVING			
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)			

**SECOND (MOST RECENT) EMPLOYER**

NAME		PHONE	
ADDRESS			
POSITION HELD		FROM MO/YR TO MO/YR	
REASON FOR LEAVING			
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)			

**THIRD (MOST RECENT) EMPLOYER**

NAME		PHONE	
ADDRESS			
POSITION HELD		FROM MO/YR TO MO/YR	
REASON FOR LEAVING			
EXPLAIN ANY GAPS IN EMPLOYMENT (Include month/year & reason)			

**EDUCATION**

SCHOOL	NAME & LOCATION	COURSE OF STUDY	YEARS COMPLETED	GRADUATE YES / NO	DETAILS
HIGH SCHOOL					
COLLEGE					
OTHER					

**OTHER QUALIFICATIONS**

Please list any other qualifications that you have and which you believe should be considered.

**TO BE READ AND SIGNED BY APPLICANT**

I authorize you to make investigations (including contacting current and prior employers) into my personal, employment, medical history, and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, health care providers, and other persons from all liability in responding to inquiries and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all rules and regulations of the School District.

I understand that the information I provide regarding my current and/or prior employers may be used, and those employer(s) will be contacted for the purpose of investigating my safety performance history. I understand that I have the right to:

- Review information provided by current/prior employers;
- Have errors in the information corrected by previous employers, and for those previous employers to resend the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

This certifies that I completed this application, and that all entries on it and information in it are true and complete to the best of my knowledge.

Applicant Name Printed	Date

Applicant Signature