

APPLICATION FOR SCHOOL BUS DRIVER

Schley County Board of Education
161 Perry Drive
PO Box 66
Ellaville, Georgia 31806

FOR THIS TYPE OF EMPLOYMENT, STATE LAW REQUIRES A CRIMINAL CHECK AS A CONDITION OF EMPLOYMENT

Date of Application: ____/____/____ Date available for employment: _____

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone #: (____) _____ Mobile/Cell #: (____) _____ Email Address: _____

Years of Driving Experience: _____
Car Bus Truck

Do you have the school bus driver/passenger endorsement on your driver's license? ☐ Yes ☐ No

Are you willing to attend a school bus driver training course? ☐ Yes ☐ No

Driver's License Number: _____ State: _____ Class: _____ Exp. Date: _____

Have you been involved as the driver in traffic accidents in the last three (3) years? ☐ Yes ☐ No

Date: _____ Nature of Accident: _____ Fatalities _____ Injuries _____

Have you been convicted of any traffic violations or DUI? ☐ Yes ☐ No

Location: _____ Date: _____ Charge(s) _____ Penalty _____
City, State

Have you ever been convicted of a felony? ☐ Yes ☐ No If so, explain _____

Has your license permit or privilege ever been suspended or revoked? ☐ Yes ☐ No

Condition of health _____ eyesight _____ hearing _____

List of any physical limitations: _____

Are you physically capable of heavy manual work? ☐ Yes ☐ No

Highest grade level completed: 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4
(PLEASE CIRCLE)

Employment History:

Starting with your most recent employer, provide the following information.

Name & Address of Employer	From	To	Nature of Work

References: (Do not use relatives)

Name & Address	Occupation	Telephone Number(s)

It is required by Georgia law and regulations and Schley County Board Policy that all applicants for bus driving positions undergo a medical examination, criminal background check, and periodic drug & alcohol testing. Job offers to bus drivers are conditioned on the results of these examinations.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

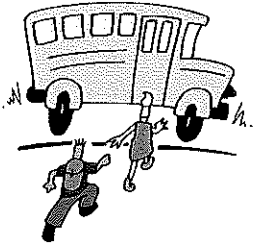
I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

This application will be held for one year. After one year, if you still desire employment in the Schley County School System, a new application should be completed. I certify that all information provided on this application is correct and accurate. I recognize that any false information provided herein will cause my application to be rejected from any consideration and/or will result in my immediate dismissal from employment.

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most states also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status, or physical or mental handicap or disability.

Signature of Applicant



Schley County School System

Qualification for Bus Driver

1. At least 21 years of age
2. Submit 3 character references
3. Possess a valid CDL license with passenger and school bus endorsement
4. Have a clean driving record
5. Must have had a valid driver's license for at least 3 years
6. Pass physical examination
7. Take and pass a drug and alcohol test and adhere to all drug/alcohol testing regulations
8. Pass a physical performance test
9. Be fingerprinted for criminal background check
(You will be considered a provisional employee until satisfactory result of criminal background investigation is received)
10. Attend refresher course (as required by the Schley County School System)

A driver is responsible for the safe and efficient transportation of children on regular assigned routes. He/She must use good judgment in the care of children and follow the directives set forth by the Schley County Board of Education.

Specific Duties

1. Transport children to and from school, field trips, athletic events, etc.
2. Complete a pre-trip and post-trip inspection of his/her vehicle a.m. & p.m. each day
3. Keep required records and file in a timely manner
4. Maintain a clean, neat and orderly bus
5. Provide for the safety of the students at all times
6. Adhere to schedules at all times
7. Set a desirable standard of courtesy and orderliness for the students to follow
8. Keep a good appearance
9. Assist a new driver to make a correct start
10. Assign seats when necessary
11. Make a walk through at the conclusion of each trip to ensure no child has been left on the bus
12. Observe carefully all laws, traffic regulations and rules of the road
Ex: Speed limits/stop signs/yield signs
Proper use of the directional signals and courteous attitude toward the general public
13. Keep route sheets up to date to assist substitute drivers
14. Responsible for students being picked up and dropped off at assigned stops only, and assigned times
15. Think of the job as that of guardian of life

Schley County School System

Pre-Employment Statement

(Please read carefully and sign the statement below)

1. Any offer of employment I may receive from the Schley County School System is contingent upon my successful completion of the system's total pre-employment screening process, including the system's receiving of satisfactory references, and satisfactory completion of any pre-employment medical examination required. I also agree, if employed, to submit to a medical exam and/or drug test at any time at the company's request. I hereby consent to having the results of any pre-employment or post-employment medical exams/drug test I may be required to take, disclosed to the Schley County School System.
2. I understand that as a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, I may be required to submit to an alcohol or drug screening at any time at the discretion of the Schley County School System. I hereby consent to having the results of any such alcohol or drug screening during my employment or violation of the prohibition of the use of alcohol and/or prohibited and/or illegal drugs while working in the course of employment may result in my termination.
3. In processing my application for employment, the system may verify all the information provided by me, or may procure or have prepared a consumer or an investigative consumer report for this purpose concerning my prior employment, military record, education, character, general reputation, personal characteristics, criminal record, and mode of living.
4. I authorize and request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damage arising from furnishing the requested information.
5. In consideration of my employment, I agree to comply with the policies, rules, regulations and procedures of the Schley County Board of Education and understand that my employment can be terminated with or without cause or notice, at any time, at the option of either the Schley County Board of Education or myself.

Signature of Applicant

Date



Schley County Board of Education

161 PERRY DRIVE ♦♦ P.O. BOX 66 ♦♦ ELLAVILLE, GEORGIA 31806
PHONE (229)937-2405 ♦♦ FAX (229)937-5180

REQUEST FOR MOTOR VEHICLE RECORDS

Date: _____

Name: _____

Address: _____
(Street)

(City, State, & Zip)

Date of Birth: _____

Driver's License Number: _____

Expiration Date: _____

I, _____, give Schley County Board of Education,
permission to obtain a copy of my motor vehicle report.

(Driver's Signature)

(Date)