

APPLICATION FOR SCHOOL BUS DRIVER EMPLOYMENT CLARENDON SCHOOL DISTRICT TWO

(PLEASE PRINT)

NAME: _____
LAST FIRST MIDDLE PREVIOUS NAME

MAILING ADDRESS: _____
STREET APT. # P. O BOX

_____ CITY STATE ZIP CODE

TELEPHONE: _____ HOME WORK CELL IF APPLICABLE MAY WE CALL YOU AT WORK? YES NO

DATE OF BIRTH: _____ SEX: M F HEIGHT: _____ WEIGHT: _____

LICENSING STATE: _____ DRIVER'S LICENSE #: _____ LICENSE CLASS: _____

Starting with high school, provide complete information on all the schools you have attended. Include any trade schools you have attended and any special courses you have taken.

Name and Location of School	Dates of Attendance from Mo./Yr to Mo/Yr	Credit Hours		Graduate		Name of Degree	Major/Minor
		Semester	Quarter	Yes	No		

Employment Record (last two employers)

1. _____ - _____ - _____ Dates employed: From _____ To _____
Employer Phone

Address: _____
Street City State Zip Code

Reason For Leaving: _____

2. _____ - _____ - _____ Dates employed: From _____ To _____
Employer Phone

Address: _____
Street City State Zip Code

Reason For Leaving: _____

References (not relatives or former employers)

NAME	PHONE	ADDRESS: STREET, CITY, ST, ZIP

I certify that the information I have provided is correct and true to the best of my knowledge. My signature represents consent to release my driving record information. I understand that supplying false information may result tin my not being considered for employment or, if I am employed, shall be considered sufficient cause for my dismissal.

To be retained by employing school district
S-4A (Rev.9/01)

Signature of Applicant

Date of Signature

DRIVER INFORMATION AND EVALUATION FORM

(SDE RECOMMENDS THAT INFORMATION GENERATED BY COMPLETING THIS FORM BE RETAINED BY EMPLOYING SCHOOL DISTRICT AS PART OF THE DISTRICT'S APPLICATION FILE AND PERMANENT DRIVER FILE)

TO BE COMPLETED BY PROSPECTIVE SCHOOL BUS DRIVERS AND ALL CURRENT SCHOOL BUS DRIVERS APPLYING FOR LICENSE RENEWAL

Driver's license Information: Indicate state _____ License No. _____

Registrant may be REFUSED admission into the school bus driver training program or a current school bus driver's driving privileges DENIED if the registrant or driver answers yes to any of the following questions:

1. Have you ever been convicted of a sex offense or crimes of violence involving force on minors? Yes ___ No ___
2. Have you ever been convicted of a crime involving violence, threat of violence, or theft? Yes ___ No ___ (If yes, please provide date of conviction _____.)
3. Have you ever been convicted of a crime involving activity in drugs or alcoholic beverages? Yes ___ No ___ (If yes, please provide date of conviction _____.)
4. Within the past three years, have you been convicted of any violation involving hit-and-run driving, driving under the influence of intoxicants, reckless driving, fleeing or attempting to elude a law enforcement officer, or failure to perform legal duties of a driver involved in an accident or collision that resulted in injury or death of any person? Yes ___ No ___
5. Have you ever been convicted of operating a vehicle in the commission of a felony, involuntary manslaughter, or child endangerment? Yes ___ No ___
6. Within the past three, years, has your driver's license been suspended by the Division of Motor Vehicles of any state for a cause involving the unsafe operation of a motor vehicle? Yes ___ No ___
7. Have you ever had your driving privileges revoked or suspended as a habitual offender? Yes ___ No ___
8. Number of points on your driving record at present: _____
9. As a valid licensed driver, do you have less than one year's vehicular driving experience? Yes ___ No ___
10. Have you ever been employed as a school bus driver? Yes ___ No ___
11. Have you ever been dismissed from a school bus driver position? Yes ___ No ___

I certify that the information provided is correct and true to the best of my knowledge. My signature represents consent to release my driving record information. I understand that supplying false information may result in my not being considered for employment or, if I am employed, shall be considered sufficient cause for dismissal. I acknowledge that I will be required to pass a physical performance test, to submit t and pass a drug screening for illegal drugs, and will be subject to a criminal background check.

SIGNATURE OF REGISTRANT/DRIVER Date

I CERTIFY THAT I HAVE CAREFULLY EVALUATED THE QUALIFICATION OF THIS REGISTRANT/DRIVER AND RECOMMEND THE FOLLOWING ACTION:

_____ Applicant/driver be admitted into the South Carolina school bus driver training program. If applicant/driver answered yes to any of the above questions, please use reverse side to provide justification for employment.

_____ Registrant/driver be rejected for admission into the South Carolina school bus driver training program.

REASON FOR REJECTION:

- _____ Does not possess a valid driver's license
- _____ Bad driving record
- _____ Criminal background
- _____ History of drug/alcohol abuse
- _____ Conviction of a sex offense and /or crimes of violence involving force on minors
- _____ Other, Explain: _____

SIGNATURE OF SCHOOL OFFICIAL DATE