BENNETT COMMUNITY SCHOOL DISTRICT

300 Cedar St, Bennett, IA 52721

Bus Driver Application	Date:		
NAME:			
Last	First	Middle	
ADDRESS:	· · · · · · · · · · · · · · · · · · ·		
Street	City	State Zip	
TELEPHONE (include area code):			
Social Security Number:			
If you are not a U.S. citizen, what is y	_	· · · · · · · · · · · · · · · · · · ·	
or your Visa Classification Nu			
	Dates of active duty:		
Available start date:			
EDUCATION AND TRAINING	5	.	
Name & Location	Dates Attended	Degree	
Grade School:			
High School:			
College:			
Other:			
Bus Driving Qualification and Experie	ence		
Current Driver's Licence Number:			
Operator:	Chauffeur's:	CDL:	
Bus Permit Number:			
Have you had the lowa 18-hour Bus		No When:	
Have you had any type of vehicle acc			
If yes, describe extent of the acciden			
	· ,		
Are there any other experiences, skil	s. or qualifications which vo	u feel would help you with	
school bus driving?			

WORK HISTORY (most recent employer first)

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2)		
Name 1)	Position	Telephone
WORK REFERENCES	B ***	Talaska
WORK DEFERENCES		
Reason for leaving:		
Duties:		
Supervisor:		
Telephone: Dates employed- From:		
Address:		
Employer name:		
Reason for leaving:		
Duties:		
Supervisor:		
Dates employed- From:	to	
Telephone:	Position:	
Address:		
Employer name:		
Reason for leaving:		
Duties:		
Supervisor:		
Dates employed- From:		
Address:	Position:	

Have you ever convicted of child abuse?YESNO Have you ever been convicted of any federal, state, county, municipal or any other law? (Example 1) include traffic violations for which the only penalty is a fine of \$35 or less)YESNO If yes to either of the above, please explain on a separate sheet of paper.	Oo not
I hereby authorize representatives of the Bennett Community School District to contact all persons and entities listed on this application and to make all other contacts, inquiries and investigations which they deem necessary in order to verify my education, employment, por and medical history, including but not limited to contacting current/past employers, education institutions, doctors and hospitals, and law enforcement agencies. I hereby consent to the release of any such information by third persons and I understand that the Bennett Communication District will keep such information in a confidential file available only to appropriate district officials.	olice onal unity
I hereby state that all information provided by me in connection with this application for employment is true, correct and complete. I understand that if I am employed, any misstate or omission of fact or otherwise, on this application or other material submitted in connection therewith, shall be cause for immediate discharge.	
I hereby release the officers, agents, employees and directors of each of my past employee from any and all liability arising from disclosure of personnel records and from verbal approof my past performance made to the Bennett Community School District. I understand and agree that this waiver includes any and all manners of actions that I may now have or may in the future concerning such disclosures, regardless of their nature.	aisals I
APPLICANT'S SIGNATURE	

Bennett Community School is an equal employment opportunity and affirmative action employer.

Date: _____

NONDISCRIMINATION STATEMENT

The Bennett Community School does not discriminate on the basis of race, color, age (except students), religion, national origin, creed, sex, sexual orientation, gender identity, or disability in admission or access to, or treatment in, it's hiring and employment practices.