

BUS DRIVER

NAME _____

BIRTHDATE _____ SOCIAL SECURITY # _____

ADDRESS _____

PHONE _____ EMAIL _____

HIGH SCHOOL DIPLOMA/GED _____ TECHNICAL TRAINING _____

CURRENT DRIVER'S LICENSE NUMBER _____

HAS YOUR DRIVER'S LICENSE EVER BEEN SUSPENDED OR REVOKED? _____ YES _____ NO

HAVE YOU HAD ANY TYPE OF VEHICLE ACCIDENT? _____ YES _____ NO DATE: _____

HAVE YOU BEEN ARRESTED FOR A MOVING TRAFFIC VIOLATION? _____ YES _____ NO DATE: _____

REFERENCES

NAME

PHONE #

NAME

PHONE #

702 KAR 5:080 Section 2 (1) (a) requires a five year driving history record.

702 KAR 5:080 Section 2 (1) (a) requires a state background check.

702 KAR 5:080 Section 2 (2) (a) requires controlled substance/alcohol testing.

Documents required for employment shall be completed before applicant assumes position.

SIGNATURE _____ DATE _____



**BUTLER
COUNTY
SCHOOLS**

Building character.
Collaborating with families.
Shaping the next generation.