

UPPER ARLINGTON CITY SCHOOL DISTRICT
1950 North Mallway
Upper Arlington, OH 43221

AN EQUAL OPPORTUNITY EMPLOYER IN ALL AREAS OF EMPLOYMENT AND PROMOTION

SUBSTITUTE BUS DRIVER

GENERAL INFORMATION

Name: _____
(Last) (First) (Middle)

Present Address: _____
(Number) (Street) (City) (State) (Zip)

EMAIL ADDRESS: _____ Telephone (Home) _____ (Work) _____

Do you have a current Ohio Driver's License that has been held for more than 5 years? Yes ___ No ___

Driver's License # _____

Do you have a CDL - Class B with S & P Endorsements? Yes ___ No ___

Have you ever been convicted by any judicial body of, or are you currently charged with, any violation of law (other than a traffic violation for which the sole penalty imposed after conviction was, or the maximum penalty to which you are subject for a charge that is now pending against you could be, a fine, suspended or unsuspended, of \$100 or less and/or costs)? **YES** ___ **NO** ___ If yes, please attach an explanation. (An affirmative answer will not necessarily disqualify you from employment. Rather, all pertinent information will be employment or the nature and time of the offense, or alleged offense, is otherwise manifestly inconsistent with the duties of the position sought.)

At the time of actual employment and consistent with provisions of O.R.C. 109.57, verification of the response to this question will be obtained from the Ohio Bureau of Criminal Identification and Investigation and other agencies. The verification process will require submission of fingerprints. Information obtained about convictions/charges will be evaluated to determine whether the nature of the offense is manifestly inconsistent with the position sought.

EDUCATION

Do you have a high school Graduation Equivalency Degree (GED)? YES ___ NO * ___

*If not, what grade did you complete? _____

Describe further formal training including trade, technical, college or university:

EXPERIENCE

WORK HISTORY - COMPLETE IN FULL

Please list your employment history as a driver of a commercial motor vehicle for the ten years preceding the date of the employment application.

Company/School	Address	Dates of Employment	Hours per Week	Reason for Leaving

This application will be maintained in our active file for a period of one year. If you desire to have this renewed at the end of this time, it is your responsibility to notify us.

I hereby certify that to the best of my knowledge and belief, all statements made herein are complete and accurate. I understand that any false statements later disclosed may cause loss of my right to certification, appointment, or retention of position and may subject me to prosecution under Ohio Revised Code Section 2921.13.

SIGNATURE _____ DATE _____

PLEASE PRINT THIS APPLICATION AND MAIL OR BRING TO: 1950 NORTH MALLWAY, UPPER ARLINGTON, OHIO 43221..