

## **BUS DRIVER APPLICATION FORM**

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Holdenville Public Schools  
210 Grimes Street Holdenville, OK 74848 Phone 405.379. 5483

Date: \_\_\_\_\_ Position Desired: \_\_\_\_\_

Full Name: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Are you a US citizen? Yes No

Are you a legal resident? Yes No

If needed, please supply any additional information that is necessary concerning your citizenship.

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### **EMPLOYMENT HISTORY:** Begin with most recent position

From: (Date) \_\_\_\_\_ To: \_\_\_\_\_ Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_ Salary: (Gross) \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

From: (Date) \_\_\_\_\_ To: \_\_\_\_\_ Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_ Salary: (Gross) \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

### **MILITARY SERVICE:**

DATES: From: \_\_\_\_\_ To: \_\_\_\_\_ Branch: \_\_\_\_\_

DATES: From: \_\_\_\_\_ To: \_\_\_\_\_ Branch: \_\_\_\_\_

Basis of Separation: Honorable Discharge Dishonorable Discharge

### **EDUCATION:**

High School: \_\_\_\_\_ Highest Grade Completed: \_\_\_\_\_

Name of College: \_\_\_\_\_

Highest Grade Completed or Degree Earned: \_\_\_\_\_

Include Any Additional Information: \_\_\_\_\_

Are you related to any present school employee?

Yes No If Yes list the name and relationship:

Have you ever been convicted of a felony or misdemeanor involving a crime with a child?

Yes                  No

If Yes, please explain:

Do you have a physical disability or handicap that might prevent you from performing the duties of this position for which you are applying?

Yes                  No

If Yes, Please Explain:

Have you attended bus driver's school?

Yes                  No                  Please list certificate number:

Do you have a Commercial Driver License?

Yes                  No

If Yes, Please list the Commercial Driver's License Number: \_\_\_\_\_

All information contained in the above application is accurate. I give my permission for Holdenville Public Schools to discuss all information concerning my employment history with previous employers and potential employers.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

The Holdenville School District 32 I-35 hereby gives notice that they do not discriminate on the basis of race, color, national origin, sex, veteran or qualified handicap in the educational programs or activities they operate. The school district complies with federal and state regulations for implementing Title VI, Title IX and Section 504. Non-discrimination is practiced both in employment and in admission of students to school programs.

Students or employees who have complaints of discrimination based on race, color, national origin, sex, veteran or qualified handicap should direct them to the official assigned to investigate such allegations. The responsible officer for Holdenville School District 32 I-35 is Jackie Kessee, Personnel Officer, 210 Grimes, Holdenville, OK 74848. Phone: (405) 379-5483 Fax: (405) 379-5874 jkessee@holdenville.k12.ok.us