Kimberly School District #414 School Bus Driver Application Insert

Name:					
Address:					
E-mail address:					
Phone Number:	Cel	Cell Phone:			
********************************* Do you have any physical impairment(s Yes No If yes, give dates and p	s) that could in	terfere with th	ne duties of a	school bus drive	r?
Current driver's license: Operators	*! *! */		*Passenge *S-endors *Air Brake	ssenger endorsement Brake	
License Number	Sta	te		****	****
Have you been convicted for any movin If yes, give dates and explain:					
Have you ever been convicted for drivir violation resulting in death of anyone? If yes, give dates and explain:	Yes	No		_	or any
Has your driver's license been suspende If yes, give dates and explain:					
Have you ever driven professionally usi If yes, how long?:			s No		
Have you driven professionally a manua	al transmissior	n? Yes	No		
List Companies you have worked for us	ing your CDL:				
NAME OF COMPANY	IMMEDIA	TE SUPERVISC)R	PHONE NUME	3ER
To the best of my knowledge, the answ	ers to the abo	ve are full and	l correct.		
To the best of my knowledge, the drisw	c.s to the abo	. c a. c ran and			

Date:______ Signature:_____