

BUS DRIVER APPLICATION

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____ SOCIAL SECURITY # _____

BIRTHDATE: _____ TX DRIVERS LICENSE NO: _____

TYPE OF DRIVERS LICENSE and ENDORSEMENTS: _____ DRIVING RECORD WILL BE CHECKED FOR VIOLATIONS

ANY PHYSICAL DEFECTS THAT MAY LIMIT YOUR ABILITY TO PERFORM THE JOB FOR WHICH YOU ARE APPLYING? YES _____ NO _____

IF YES, EXPLAIN

HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____ NO _____ YES IF YES, PLEASE DESCRIBE:

HAVE YOU EVER BEEN CONVICTED OF ANY MISDEMEANOR INVOLVING A MINOR? _____NO _____YES IF YES, PLEASE DESCRIBE:

PLEASE LIST YOUR MOST PREVIOUS EMPLOYERS:

1.	_____	_____	_____
	Name	Address	Phone Number
2.	_____	_____	_____
	Name	Address	Phone Number
3.	_____	_____	_____
	Name	Address	Phone Number

DESCRIBE ANY OTHER RELATED DRIVER EXPERIENCE: _____

GIVE 3 REFERENCES:

1.	_____	_____	_____
	Name	Address	Phone Number
2.	_____	_____	_____
	Name	Address	Phone Number
3.	_____	_____	_____
	Name	Address	Phone Number

If employed by the Teague ISD, I agree to reimburse (through payroll deduction) the school district the cost of the criminal history check and fingerprinting

cost (not to exceed \$60 plus reimbursement for mileage) under any of the following conditions (See policy CFEA Legal #12):

- 1.) I voluntarily terminate my employment with Teague ISD within my first 3 months of employment or I am terminated within my 3 month probationary period and/or
- 2.) I am terminated for causes such as but not limited to: any false statement or omission regarding my criminal history as listed in my employment application and related information.

DATE: _____

SIGNATURE: _____

The Teague Independent School District does not discriminate on the basis of race, color, national origin or handicap.

PROVIDING YOUR SOCIAL SECURITY NUMBER ALLOWS THE DISTRICT TO VERIFY ANY CERTIFICATIONS YOU MAY HAVE. DISCLOSURE IS OPTIONAL.
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CRIMINAL HISTORY RECORD INFORMATION

CONFIDENTIAL

The Teague Independent School District is authorized and required by law to obtain state and national criminal history record information on employees, applicants and volunteers (Texas Education Code §22.083). The information required below is necessary to obtain criminal history record information.

Please Print

Name _____
Last First Middle

Address: _____
Street City State Zip Code

Social Security Number _____ Drivers License Number _____

Date of Birth _____
mm/dd/yyyy

Sex: Male Female

Ethnicity: Black White Hispanic
 Asian or Pacific Island
 Native American Other

Previous Names & Addresses:
(Including maiden name)

Name	Address	City, State, Zip Code

I understand that the information I am providing about age, sex, and ethnicity will not be used to determine eligibility for employment, but will be used solely for the purpose of obtaining criminal history record information.

Signature

Date

*This form will be removed from the application and filed separately in the personnel office.