Morgan County Board of Education 247 Harrison Avenue Berkeley Springs, WV 25411

Bus Operator Application

APPLICANTS ARE TO ANSWER ALL QUESTIONS FULLY AND COMPLETELY IN THEIR OWN HANDWRITING.

| NAME | . 10-0- | | | | | | |
|-------------------------|--------------------|----------------|--------------------------|------------------|------------------|--------------|--|
| Last | | First | Middle | | | | |
| Present Address_ | | - W-1 | · | | | | |
| | Street | | <i>C</i> ity | | State | Zip Code | |
| Phone Number | | (| Cell Phone | " | | | |
| E-mail Address: | , »»» | | | | | | |
| Social Security Number: | | | Driver's License Number: | | | | |
| | eport to work? | | | | | | |
| Number of years of | driving a car: | , α truc | k: | , a bus: | | <u> </u> | |
| | | SCHOOL | RECORD | | | | |
| SCHOOL | NAME OF SCH | | | Did | you grad | uate? | |
| Grade School | | | | | | | |
| High School | | 100.2 | | | | | |
| Business or Trade | | | | | | | |
| Correspondence | | | **** | | | | |
| College | | | | | | | |
| | CE – Start with yo | | | | | | |
| Dates | | | | | | | |
| From: | To: Na | me of Employer | Location | Your Position | Reasor Leavir | | |
| 1 1 041. | io. Na | me of Employer | Location | | | | |
| | | | | | | | |
| | | | | | · | | |

REFERENCES: Give names of people who are not relatives or former employers. Names of former school teachers, neighbors, and business people who know you personally are preferred. How are you acquainted NAME ADDRESS Phone No. with this person? 2. Have you ever wrecked a car, truck or other vehicle? If so, state when and the cause: Has your privilege to operate a motor vehicle ever been revoked, suspended or refused in this or any other state? Do you drink intoxicants? _____ How often? ____ Have you been convicted on a charge of being under the influence of intoxicating liquor, drugs or narcotics in public within the last two years? Have you had Red Cross First Aide Training or UMW First Aid Training? Are you willing to take First Aid Training? _____ Are you willing to take a physical exam? _____ Will you drive anywhere in the county? Will you grease your bus and repair your tires if necessary? Are you willing to make curricular and/or extra-curricular trips? ______ AFFIRMATION AND SIGNATURE: I hereby formally make application for a position with Morgan County

AN EQUAL OPPORTUNITY EMPLOYER

_____ Date:

Schools and assert that the information given in this application is true and accurate to the best of my

This application should be complete and accurate in every detail. It will be placed on file for THIS SCHOOL YEAR.

knowledge:

Signature:

As required by federal laws and regulations, the Morgan County Board of Education does not discriminate on the basis of sex, race, color, religion, handicapping condition, age and national origin in employment and in the administration of any of its education programs and activities. Inquiries may be directed to the Title IX Coordinator, Morgan County Board of Education, 247 Harrison Avenue, Berkeley Springs, WV 25411 Phone Number (304) 258-2430; to the Section 504 Coordinator, Morgan County Board of Education, 247 Harrison Avenue, Berkeley Springs, WV 25411 Phone Number (304) 258-2430; to the Elimination of Sex Discrimination Program Coordinator Phone Number (304) 348-7864; or to the U.S. Department of Education's Director of the Office for Civil Rights, Phone Number (215) 596-6795.