

**Holdingsford Public Schools**  
**Employment Application for Position of School Bus Driver**  
**PO Box 250 Holdingsford, MN 56340**  
**320-746-4307**

This application will remain active for one year from today's date. All job openings will be advertised regardless of whether or not active applications are on file. Applications in the absence of an advertised job opening will not enjoy a higher or lower priority than those received as a result of the advertisement of a particular job opening. Recommendations are made to the school board on the basis of qualifications. The school board remains the final authority in all matters related to hiring.

Preliminary job screening will include an evaluation of this application form along with any additional information you may wish to provide in the form of a resume, placement file, letters of recommendation, or similar documentation.

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

TODAY'S DATE \_\_\_\_\_

1. Driver's license number \_\_\_\_\_ Expiration date of driver's license \_\_\_\_\_

2. Do you hold a Class A or Class B driver's license? \_\_\_\_\_

Does your license have a school bus endorsement? \_\_\_\_\_

3. Years of active driving experience: School Bus \_\_\_\_\_ years; Heavy Truck \_\_\_\_\_ years

4. Have you had an accident while driving which resulted in injuries to yourself or others in the past 3 years? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, describe extent of the accident or accidents and give year \_\_\_\_\_

5. In the past 3 years have you had any vehicle and/or traffic law convictions recorded on your Driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, fill in section below:

<u>Date</u>	<u>Offense</u>	<u>Disposition and Fine</u>	<u>Court Location</u>
_____	_____	_____	_____
_____	_____	_____	_____

6. Have you ever been convicted of a felony or any offense against public morals? Yes \_\_\_\_\_ No \_\_\_\_\_

7. In the past 5 years have you ever been convicted of driving a motor vehicle while under the influence of alcohol? Yes \_\_\_\_\_ No \_\_\_\_\_

If "yes" give date of violation and details. \_\_\_\_\_

8. Are you over the age of 18 years? Yes \_\_\_\_\_ No \_\_\_\_\_

9. Are there other conditions that may interfere with safe driving? Yes \_\_\_\_\_ No \_\_\_\_\_

If "yes" give details. \_\_\_\_\_

10. Do you have a current medical examiners certificate? Yes \_\_\_\_\_ No \_\_\_\_\_

11. Have you ever attended an approved bus driver workshop? \_\_\_\_\_ If so, when \_\_\_\_\_ Where? \_\_\_\_\_

12. List experience you have had which you feel helps qualify you as a good school bus driver \_\_\_\_\_

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13. If you are offered a contract as a bus driver, do you agree to abide by all rules and regulations affecting school bus operations as promulgated by this state, the school board and your employer? \_\_\_\_\_

**EDUCATION HISTORY**

<u>High School/Vocational/College</u>	<u>Type of Training Diploma/Degree Received</u>

**EMPLOYMENT HISTORY**

<u>Employer: Name &amp; City</u>	<u>Type of Work</u>	<u>How Long Worked</u>		<u>Reason Left</u>	<u>Last Wage</u>
		<u>From</u>	<u>To</u>		

REFERENCES; Name 3 people that have known your work abilities for at least 1 year. Do not list relatives.

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<u>Name</u>	<u>E-mail Address</u>	<u>Phone #</u>	<u>Occupation or why listed here</u>	<u>Years Known</u>

I hereby give permission for Holdingford Schools to contact my current/former employer/s.

I hereby certify that all the questions are correctly and truthfully answered and I authorize Holdingford Public Schools to contact my former employers and references regarding my character and qualifications as a school bus driver. I understand that any misleading or untruthful statements would render this application void, and if employed, would be just cause for immediate dismissal. I further certify that I am not a habitual user nor addicted to drugs or alcohol. In conclusion, the school district may obtain my driving record from the Minnesota Department of Public Safety – Driver and Vehicle Services Division on an annual basis.

Veteran’s Preference: If you are a veteran and wish to claim veterans' preference, you must present a legible photo copy of your “DD214” (notice of discharge) to be attached to this application.

Do you wish to claim Veteran’s Preference?          Yes \_\_\_\_\_          No \_\_\_\_\_

Applicants Signature \_\_\_\_\_          Date \_\_\_\_\_

FMLA regulations require all employers to post the [updated FMLA notice](#).

**AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER**  
**Committed to Workforce Equity, Diversity and Inclusion**

Holdingford Public Schools, District 738 does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups.