



## SCHOOL BUS DRIVER APPLICATION FORM

<b>Name:</b>		<b>Phone No.:</b>
<b>Mailing Address:</b>	<b>Location of Residence:</b>	<b>S.I.N.:</b>

<b>Driver's License #:</b>	<b>Bus Driver Certificate #:</b> (if qualified)	<b>Applying For:</b> Route # <input type="checkbox"/> Spare <input type="checkbox"/>
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<b>DRIVING AND OTHER WORK EXPERIENCE</b>

<b>DRIVING RECORD</b> <i>(please attach a copy of your Official Driver Abstract from Manitoba Public Insurance).</i>
<b>COMMENTS:</b>

<b>GENERAL HEALTH CONDITION</b> <i>(please comment on your general health).</i>

### REFERENCES

<u>Name:</u>	<u>Occupation:</u>	<u>Telephone No:</u>
1.		
2.		

*Further information may be attached or added on the back of this application.*

<b>Signature</b>	<b>Date</b>
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**To be returned to:**

Transportation Supervisor  
Beautiful Plains School Division  
Box 700, Neepawa, MB  
R0J 1H0  
FAX: (204) 476-5048

<b>This application and attached documents will be treated as confidential by the School Division and is subject to the Freedom of Information and Protection of Privacy Act.</b>
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