

New Hanover County Schools
SCHOOL BUS AND TRAFFIC SAFETY SECTION
QUESTIONNAIRE FOR PROSPECTIVE SCHOOL BUS DRIVERS

Date _____

Full name as it appears
on your Driver's License _____ Driver's License No. _____

Address _____

Soc. Sec. No. _____ Date of Birth _____ Telephone No. _____

Email Address _____

DRIVING RECORD:

Has your driver's license ever been cancelled, revoked, or suspended? Yes No
If it has, when and why? _____

List any convictions (including PJC) in the last five years: _____

Have you ever been convicted of DWI? Yes No
If so, when and where? _____

List any other states in which you have been licensed to drive in the last five years: _____

CRIMINAL RECORD:

Have you ever been convicted of a criminal offense? Yes No
If the answer is "Yes," explain the charges and convictions on the back of this form or on a separate sheet.

PHYSICAL CONDITION:

Do you have any physical handicap? Yes No

I certify that I am physically able-bodied and free of physical handicaps. I do not suffer from any chronic diseases such as heart trouble, epilepsy, high or low blood pressure, fainting or dizzy spells, diabetes, or physical disability or disease as will serve to prevent my exercising reasonable or ordinary control over a motor vehicle while operating same upon the highways. I am not a user of narcotics or impairing drugs nor addicted to alcoholic beverages.

Signature _____ Date _____

Return form to: Valeria Jones, Transportation Department, 2814 Carolina Beach Rd., Wilmington, NC 28412 or fax 910-254-4388