

**CORINTH SCHOOL DISTRICT
SCHOOL BUS DRIVER APPLICATION FOR EMPLOYMENT**

Please print, complete and return to:
Edward Lee Childress, Ed. D., Superintendent
Corinth School District
1204 North Harper Road
Corinth, Mississippi 38834
(662) 287-2425

Note: The applicant should exercise the greatest care in preparing this application.
Information given herein becomes a legal part of the contract in case of election.
Please do not omit any items.

Date: _____

Name: _____

Address: _____

_____ Zip Code: _____

Phone: _____ Email: _____

Birth Date: ___/___/___ Driver's License Number: _____ Expiration: _____

Restrictions: _____ Endorsements: _____

PERSONAL INFORMATION

1. Have you previously been employed as a bus driver? Yes No

If 'yes', where? _____

2. Have you completed a course in school bus training conducted by the MS State Department of Education?
 Yes No

If 'yes' what district? _____ Date: _____

3. Have you ever been involved in a chargeable motor vehicle accident in which any person was injured or killed?
 Yes No

If 'yes' where? _____ Date: _____

4. Have you ever been convicted of a misdemeanor or felony? Yes No

If 'yes' where? _____ Date: _____

5. Have you ever been convicted of any sex offense? Yes No

If 'yes' where? _____ Date: _____

6. Has your driver's license ever been suspended or revoked? Yes No

7. Have you ever incurred an industrial injury? Yes No

If yes, nature of condition and dates: _____

8. Have you received any compensation for a work-related injury? Yes No

If yes, please explain: _____

9. Do you have any physical or mental impairment(s) that would adversely affect your ability to perform the job tasks for which you are applying? Yes No

If yes, please describe: _____

REFERENCES: List the following information of your current and previous employers

Employer/Supervisor: _____
Address: _____

Phone Number: _____ Dates Employed: _____
Reason for Leaving: _____
Job Titles and Duties: _____

Employer/Supervisor: _____
Address: _____

Phone Number: _____ Dates Employed: _____
Reason for Leaving: _____
Job Titles and Duties: _____

Employer/Supervisor: _____
Address: _____

Phone Number: _____ Dates Employed: _____
Reason for Leaving: _____
Job Titles and Duties: _____

If selected as a bus driver, I agree to keep informed at all times of traffic rules and state and district rules; to observe such rules; and to attend any school bus driver training course sponsored by the state or school district. I also understand the school bus will conduct a driver record check and may complete a criminal background check on applicants to drive a school bus.

NOTE: The information given on this application is true and correct to the best of my knowledge and belief. I understand that any false information may invalidate the applicant's employment contract.

Signature of Applicant

Date

APPLICATION VALID ONE (1) YEAR FROM DATE OF RECEIPT

Equal Opportunity Employer: The Corinth School District does not discriminate on the basis of race, sex, gender, religion, disabilities, or national origin.