



**APPLICATION FOR SCHOOL BUS DRIVER**

**DETROIT CATHOLIC CENTRAL HIGH SCHOOL**

Basilian Fathers – 1928

27225 Wixom Road – Novi, MI 48374

TEL: 248.596.3810 ▪ FAX: 248.596-3811 ▪ [www.catholiccentral.net](http://www.catholiccentral.net)

Date of Application: \_\_\_\_\_

Detroit Catholic Central High School is an Equal Opportunity Employer and considers all candidates for employment equally regardless of race, color, national origin, sex, age or handicap. Because of its status as a religious entity, the school may consider the candidates' religious affiliation in its employment decisions, consistent with State and Federal law.

**NOTE: PLEASE PRINT LEGIBLY AND COMPLETE THIS FORM IN INK ONLY; INCOMPLETE FORMS WILL NOT BE PROCESSED.**

**PERSONAL DATA:**

|  |   |                               |
|--|---|-------------------------------|
| Name (Last)  | (First)   | (Middle)                      |
| Street Address   | City  | State Zip                     |
| Cell Phone Number<br>( )   | Social Security Number<br>- -   | Driver's License Number/State |
| High School Attended   | Graduated<br><input type="checkbox"/> YES <input type="checkbox"/> NO |                               |
| College/Tech School Attended   | Graduated<br><input type="checkbox"/> YES <input type="checkbox"/> NO |                               |
| U. S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No If not a citizen of the U.S., have you the legal right to remain permanently in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No |   |                               |

**EMPLOYMENT INFORMATION:**

| EMPLOYER NAME AND ADDRESS | CONTACT PERSON AND PHONE | POSITION | REASON FOR LEAVING | DATE OF EMPLOYMENT |
|---------------------------|--------------------------|----------|--------------------|--------------------|
|                           |                          |          |                    | From:<br><br>To:   |
|                           |                          |          |                    | From:<br><br>To:   |
|                           |                          |          |                    | From:<br><br>To:   |
|                           |                          |          |                    | From:<br><br>To:   |

**CRIMINAL RECORD:**

- |  |                          |                          |
|--|--------------------------|--------------------------|
|  | YES                      | NO                       |
| 1. Have you been <b>convicted*</b> of any misdemeanor? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you been <b>convicted*</b> of any felony?      | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you been <b>convicted*</b> of any sex offense? | <input type="checkbox"/> | <input type="checkbox"/> |

**\*Convicted** is defined as any time you were found guilty of an offence and either:

- |                               |                                       |  |                          |
|-------------------------------|---------------------------------------|--|--------------------------|
| - forfeited a bond;           | - received a "suspended" sentence;    | - paid a fine;                           | - served time in prison. |
| - served a term of probation; | - served time in city or county jail; | - received a "deferred" sentence; and/or |                          |

If YES to questions 1, 2, and/or 3, complete the list below (include all criminal traffic violations such as DUI, reckless driving, etc.)

| ARREST DATE | STATE | VIOLATIONS/CHARGE | COURT SENTENCE | SENTENCE COMPLETED |    |
|-------------|-------|-------------------|----------------|--------------------|----|
|             |       |                   |                | YES                | NO |
|             |       |                   |                |                    |    |
|             |       |                   |                |                    |    |
|             |       |                   |                |                    |    |

| DRIVING RECORD:   | YES | NO |
|---|-----|----|
| Within the past 3 years, has your driver's license been suspended by the DMV of any state for a cause involving the unsafe operation of a motor vehicle?                        |     |    |
| Have you ever had your driver privileges revoked or suspended?  |     |    |
| As a valid licensed driver, do you have less than one year of vehicular driving experience?   |     |    |
| Do you presently have any points on your driving record (e.g., is your MVR is free of violations)?<br>If yes, indicate number of points _____                                   |     |    |
| Have you ever been employed as a school bus driver?<br>If yes, Name/Employment Date/Address of County/District by whom employed:  |     |    |
| Have you ever been dismissed from a school bus driver position?   |     |    |
| Do you have any physical or mental limitations which would prevent or impair your performance of the job for which you are applying?<br>If yes, please describe: _____<br>_____ |     |    |

**REFERENCES:**

Please list references, **not** relatives or former employers.

| NAME | ADDRESS | PHONE NUMBER |
|------|---------|--------------|
|      |         |              |
|      |         |              |
|      |         |              |

I certify that the information provided here is correct and true to the best of my knowledge. My signature represents consent to release my driving record/history and my employment record/history information. I understand that supplying false information may result in my not being considered for employment or, if I am employed, shall be considered sufficient cause for dismissal. Detroit Catholic Central High School is hereby authorized to release to any other firm or person with whom I may seek employment, any and all information concerning my employment or application. I acknowledge that I will be required to pass a physical performance test, to submit to and pass a drug screening for illegal drugs, and will be subject to a criminal background check.

I agree, if I am hired, I will attend the "Protecting God's Children" course offered through the Archdiocese of Detroit within one month of my start date.

I agree that I will provide Detroit Catholic Central High School my Medical Examiner's Certificate in accordance with the Federal Motor Carrier Safety Regulation (49 CFR 391.41 – 391.49) and continue to maintain a current Certificate.

I acknowledge that I will be responsible for reading and abiding by Detroit Catholic Central High School's Fleet Safety Program, Distraction-Free Driving Policy and any other policies as they relate to my position. I acknowledge that failure to do so may result in disciplinary action, up to and including termination.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Applications may be mailed, faxed or returned in person along with a copy of your current Driver's License to:

Marie Heshczuk  
Business Office - Human Resources  
Detroit Catholic Central High School  
27225 Wixom Road  
Novi, Michigan 48374  
FAX: 248.596.3894



### AUTHORIZATION AND RELEASE

I authorize Detroit Catholic Central High School to check my employment history, including without limitations, reference checks, and to seek the release of investigatory information, including an "expanded criminal history", possessed by any private or public employer or any local, state or federal agency. I authorize these private or public employers or local, state or federal agencies to provide the Detroit Catholic Central High School any information they may release concerning the matters described herein, and I will cooperate to the extent necessary to obtain the release of this information.

I expressly waive in connection with any request for, or provision of such information, any claims or causes of action, including without limitations, defamation, infliction or emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the Detroit Catholic Central High School, its officials, employees, trustees or agents, or against any provider of such information.

I have read this authorization and release of all claims, and I expressly agree to the terms set out herein.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### AUTHORIZATION TO OBTAIN DRIVING RECORD

Name (as listed on Driver's License): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Michigan Driver's License Number: \_\_\_\_\_

I authorize Detroit Catholic Central High School to obtain my state driving record. I understand that my employment as a Bus Driver is contingent upon a clean official record from the State of Michigan Secretary of State office. I understand that my continuous employment is contingent upon maintaining a clean driving record.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_