



River View Local School District

Office of the Superintendent
26496 SR 60 North, Warsaw, Ohio 43844
(740) 824-3521
www.river-view.k12.oh.us

Application for Van Driver

Transportation Department – VAN DRIVER

Date _____

Name _____ Birth Date _____

Home Phone _____ Cell Phone _____

Address _____ City _____ State _____ Zip _____

In Case of Emergency, Who Should We Contact?

Name _____ Home Phone _____ Cell Phone _____

Van Driver Position:

- Number of years driving experience: ____ car ____ truck ____ bus
- Do you have an Ohio Commercial Driver License? ____ yes ____ no Class ____
License Number _____ List Endorsements _____
- Do you have an Ohio Pre-Service School Bus Drivers Training Certificate? ____ yes ____ no
Date Completed _____ Classroom Instructor _____
On Bus Instructor _____
- Do you have a First Aid Certificate? ____ yes ____ no
- Do you have a CPR Certificate? ____ yes ____ no
- An ODOT pre-employment drug test and also a random drug and/or alcohol screenings are required quarterly if selected. Are you willing to do so? ____ yes ____ no
- Has your driver's license ever been suspended or revoked? ____ yes ____ no
- How many current points do you have on your license? _____
- Have you driven bus in another school district? ____ yes ____ no School District _____

Signature

Date

Transportation Use Only	
Physical (T-8)	Date _____
Drug/Alcohol Testing	Date _____
BCII State & Federal	Date _____ (copies must be in transportation records)
Copy of Drivers License	Expires _____
Motor Vehicle Check	Date _____

Employment References (previous employers)

Employer _____	Position Held _____
Address _____	Phone _____
Dates Worked _____ to _____	Supervisor _____
Reasons for Leaving _____	

Employer _____	Position Held _____
Address _____	Phone _____
Dates Worked _____ to _____	Supervisor _____
Reasons for Leaving _____	

Employer _____	Position Held _____
Address _____	Phone _____
Dates Worked _____ to _____	Supervisor _____
Reasons for Leaving _____	

Personal References:

Name _____	Position _____
Address _____	Phone _____
Name _____	Position _____
Address _____	Phone _____

Military Service:

Branch of Military _____	Training & Duties _____
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If employed, you must be able to prove your US citizenship and successfully complete a background check with the Bureau of Criminal Investigation and the Federal Bureau of Investigation. Can you do so? yes no

I hereby authorize the River View Local School District to obtain all data needed to support this application. I certify that all information on this application is true and complete to the best of my knowledge. I understand that "any person who knowingly makes a false statement is guilty of falsification under section 2921.13 of the Revised Code, which is a misdemeanor of the first degree."

(Applicant's Signature)

The River View Local School District Board of Education provides equal employment opportunities to all people regardless of race, color, national origin, sex or handicap.

Revised February 2023