

# HARFORD COUNTY PUBLIC SCHOOLS

102 S. Hickory Avenue Bel Air, Maryland 21014 (410) 638 - 4092 AN EQUAL OPPORTUNITY EMPLOYER www.hcps.org

## SCHOOL BUS DRIVER/ATTENDANT APPLICATION

The Harford County Public School System does not discriminate on the basis of race, color, sex, age, national origin, religion, sexual orientation, marital status, genetic identification, political affiliation, or disability in matters affecting employment or in providing access to programs for employees. Inquiries related to the policies of the Board of Education of Harford County should be directed to the Manager of Communications, 410-588-5203.

POSITION APPLYING FOR:	School Bus Driver	School Bus Atte	ndant
Have you ever worked for the HARFORD CO	UNTY PUBLIC SCHOOL SYSTEM?	□ YES	□ NO
IF YES, WHEN	WHERE _		
PERSONAL DATA			
Name:			
Home Address:	Нс	ome Phone:	
City/State/Zip Code:	Wo	ork Phone:	
E-mail address:	Ce	ell Number:	

If you are offered employment by Harford County Public Schools, can you submit verification of your legal right to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

### EDUCATION RECORD

High School Name and address	Dates Attended	Year of Graduation	Highest Grade <u>Successfully</u> Completed	Date Awarded High School Equivalency Diploma (GED)
<u>College or University</u> Name and address of college, university or professional school	Dates Attended	Degree and Subject Area	Credit Hours	Years Completed
Other Training/Certification	Dates Attended	Did you complete the course?	Certification or License	Expiration Date

### **EMPLOYMENT RECORD**

- List present or last employment position first.
  List complete employment history (high school to present). Account for all breaks in employment.
  Give complete mailing address for all employment history.
  Include military service.
  Attach additional sheet if needed.

Date of Employment (Month/Year)	Employer	Employer's Address		Employment Information			
From	Name	Mailing Address		Position	Salary		
То	Type of Business	City	, State & Zip Code		Reason for Leaving	on for Leaving	
Supervisor's Name			Phone:	Duties Perf	ormed:		
			OFFICE USE ONLY - SENT:				
From	Name	Mai	ling Address		Position	Salary	
То	Type of Business	City	, State & Zip Code		Reason for Leaving		
Supervisor's Name			Phone:	Duties Perf	ormed:		
			OFFICE USE ONLY - SENT:				
From	Name	Mai	ling Address		Position	Salary	
То	Type of Business	City, State & Zip Code Reason for Leaving					
Supervisor's Name			Phone:	Duties Perf	ormed:		
			OFFICE USE ONLY - SENT:				
From	Name	Mai	ling Address		Position	Salary	
То	Type of Business	City	, State & Zip Code		Reason for Leaving		
Supervisor's Name			Phone:	Duties Perf	ormed:		
			OFFICE USE ONLY - SENT:				
From	Name	Mai	ling Address		Position	Salary	
То	Type of Business	City	r, State & Zip Code		Reason for Leaving		
Supervisor's Name		<u> </u>	Phone:	Duties Perf	ormed:		
			OFFICE USE ONLY - SENT:				

### REFERENCES

Please provide complete information for a minimum of two professional references, who have known you for a minimum of three (3) years. *Family members and personal friends are <u>not</u> acceptable professional references.* 

Name	Mailing Address	Phone:	
Occupation and Years Acquainted	City, State & Zip Code		OFFICE USE ONLY
			SENT:
			SENT.
Name	Mailing Address	Phone:	
Occupation and Years Acquainted	City, State & Zip Code		OFFICE USE ONLY
			SENT:
			SENT.
Name	Mailing Address	Phone:	
Occupation and Years Acquainted	City, State & Zip Code		OFFICE USE ONLY
			SENT:
			OLIVI.

#### DRIVER'S LICENSE INFORMATION (TO BE COMPLETED BY BOTH DRIVER AND ATTENDANT APPLICANTS)

Valid Operator's License Held:	Class:	License N	lumber:		
Years of Driving Experience:	Car:	Truck:		Bus:	_
Have you been convicted of violating	g any traffic laws?	Yes	No		
Has your license ever been suspend	ded?	Yes	No		
Are you willing to take training cours	es for school bus drivers and	attend perio	odic safety meetings?	Yes	No
CONVICTION OR DISMISSAL					
Have you ever been convicted or rec minor traffic violations for which a fin			rime? ( <u>Do not include</u>	Yes	No
Have you been charged with a crime	e and/or are awaiting trial?			Yes	No
Have you ever been dismissed, aske	ed to resign, or refused reemp	loyment?		Yes	No
Have you ever been investigated or	charged with any offense rela	ting to child	dren?	Yes	No
In any previous employment experie	ence, have you ever received a	an oral or w	vritten reprimand?	Yes	No

If your answer to any of the five questions is "yes", please provide details on a separate sheet of paper.

<u>IMPORTANT NOTE:</u> If the answers to the above questions change after the date you originally sign this application, you must immediately notify the Human Resources Office in writing of the nature and reasons for those changes.

#### PLEASE READ CAREFULLY

I understand that everyone hired by Harford County Public Schools is fingerprinted and subject to a criminal background check. In addition, I understand that I may be subjected to a pre-employment physical. I also understand that unsatisfactory results from these pre-employment checks will result in withdrawal of any employment offer or termination of employment if already employed.

I understand that acceptance of this application does not constitute an employment agreement.

I hereby affirm that the information given by me in this application is true and complete to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission will be sufficient cause for cancellation of the application or discharge, if I have been employed. The Human Resources Office has my permission to contact all past and present employers.

### LIE DETECTOR TESTS (Article 100, Section 95, Annotated Code of Maryland)

"Under Maryland law an employer may not require or demand any applicant for employment or prospective employment or any employee to submit to or take a polygraph, lie detector or similar test or examination as a condition of employment or continued employment. Any employer who violates this provision is guilty of a misdemeanor and subject to a fine not to exceed \$100."

Date

Signature of Applicant

TRA	<b>NSPORTATION OFFICE</b>	USE ONLY	
		DATE	COMPLETED BY
FOLDER:			
Blue Card			
Consent Form			
Negative Drug Results			
Driver's License (photocopy)			
Social Security Card (photocopy)			
MVA Driving Record (Maryland) Out of State Needed: Out of State Received:			
Interviewed I-9 Sent to HR: Maryland New Hire Registry Sent to	HR:	·	
Fingerprinting State Background Check Sent to HR: Child Care/FBI Sent to HR:			
References sent: Work Personal			
Physical Examination			
Classroom Driver Pre-Service (10 hours) Attendant Pre-Service (4 hours) First Aid/CPR (6 hours) Special Needs (4 hours)		·	
Behind the Wheel: hours			
Road Test			
Approval from Transportation Director			
Letter Sent			
Notes:			



# Harford County Public Schools TRANSPORTATION OFFICE

410-638-4092 410-638-4321 (FAX)

## SCHOOL BUS DRIVER AND ATTENDANT QUESTIONNAIRE

# Please answer the questions below and return the form with your application to the Harford County Public Schools Transportation Office.

1. Do you understand that a school bus driver/attendant normally works from the hours of 6:00 a.m. to 9:30 a.m., 11:00 a.m. to 1:15 p.m., and again from 1:45 p.m. to 4:30 p.m.? (Circle One) YES OR NO

Would you have difficulty working any of these shif	ts?			
, , , , ,	(Circle One)	YES	OR	NO
If so, which one?				

- 2. Do you understand that it is your responsibility to provide transportation to and from work? (Circle One) YES OR NO
- 3. Briefly state, why are you interested in becoming a school bus driver or attendant?

## 4. DRIVER APPLICANTS ONLY

Do you understand that you may be required to attend on special needs buses? (Circle One) YES OR NO

Do you understand that this requirement is not an	option?			
	(Circle One)	YES	OR	NO

Print Name:

Signature:

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



# **Harford County Public Schools**

TRANSPORTATION OFFICE

410-638-4092 410-638-4321 (FAX)

### SCHOOL BUS DRIVER AND ATTENDANT APPLICANT REQUIREMENTS

- 1. <u>Application</u> <u>The application must be filled out completely</u>. All employment and/or years since high school must be accounted for. <u>All questions must be answered and the application must be signed</u>. The inserts in the application must be filled out completely.
- 2. <u>References</u> The individual submitting an application is required to provide a complete employment history <u>and</u> a minimum of two (2) professional references. Past employers will be contacted as well as the individuals/businesses listed as professional/business references. Family members and personal friends are <u>not</u> acceptable references. Addresses must be complete and up-to-date. The current zip code must be included.
- 3. <u>MVA Record</u> (Drivers only) You must obtain a <u>complete</u> driving record from the Motor Vehicle Administration. The cost will be approximately **\$9.00**. <u>No 36 month driving records will be accepted</u>. You must ask for a <u>complete</u> driving record. The <u>complete</u> driving record contains all of the driver's history. A certified copy is <u>not</u> required. If the applicant holds or has held an out-of-state license, proof of the applicant's driving record must be obtained from that state before the applicant can be <u>certified</u> to drive a vehicle. A FAX will be accepted from a State Motor Vehicle Administration. Applicants are responsible for fees to obtain the Motor Vehicle Administration record.

THE ABOVE MENTIONED MVA RECORD MUST BE RETURNED TO THE TRANSPORTATION DEPARTMENT OF THE HARFORD COUNTY PUBLIC SCHOOLS BEFORE ANY FURTHER PORTION OF THE APPLICATION PROCESS CAN PROCEED!

- 4. <u>Certification Process</u> Upon completion of items 1, 2, and 3, the applicant will be notified by the Transportation Department to report for the certification process and fingerprinting session at a specific date and time. Attendants need only comply with items 1 and 2.
- 5. <u>Physical</u> All applicants must have a physical examination which is to be performed by <u>a physician</u> retained by the Harford County Public Schools. NOTE: An applicant who has been treated by a physician or hospital for any of the following listed below, must have Part II of the Certificate of Health completed by their primary physician. The primary physician must indicate onset, diagnosis, prognosis, and any medication currently being prescribed. <u>PLEASE NOTE</u>: This information must be documented before scheduling an appointment with our Harford County Public School's doctor.

Abnormal blood pressure Alcoholism or abuse	Epilepsy Hearing limitation	Paralysis Psychiatric disorder
Diabetes	Heart ailments	Stroke
Drug/Narcotic addiction	Loss of limb	Tuberculosis

The Transportation Department will pay for your D.O.T. physical examination. Upon completion of his/her examination, the completed form must be <u>returned to the Transportation Office.</u>

6. <u>Drug Test</u> - Upon successfully passing the school bus driver physical examination, a pre-employment drug test will be required of the driver applicant. When the applicant is called to report for a drug test, he/she will have twenty-four (24) hours to comply. If the applicant does not report within 24 hours from the notification date and time for drug testing, the applicant will be automatically <u>disgualified</u>. The Transportation Department will pay for the drug test.

# <u>IMPORTANT NOTE</u>: An applicant is <u>NOT</u> to report for a drug test <u>UNTIL</u> informed to do so by the authorized Drug Coordinator of the Transportation Department.

- 7. **Commercial Driver's License** A Class "B" commercial driver's license with a passenger ("P") and school bus ("S") endorsement is required to drive a public school bus. After being informed by the Transportation Department of the successful passage of the pre-employment drug test, an applicant should obtain a permit for a Class B commercial driver's license. This permit is obtained from any Motor Vehicle Administration Office. If the test is going to be taken at any MVA office other than where the permit is purchased, the applicant must tell the MVA Administrator where he/she will be taking the test when he/she is purchasing the permit. The fee for the permit will be approximately \$90.00 and is required when the written tests are satisfactorily completed. (This fee may vary according to Motor Vehicle Administration Regulations.) An applicant will have to pass the written tests which are required for a commercial driver's license. The specific tests which must be taken are:
  - General Knowledge
  - Passenger Endorsement
  - School Bus Endorsement

When a CDL permit is obtained, the applicant must notify the Transportation Department (410-638-4092).

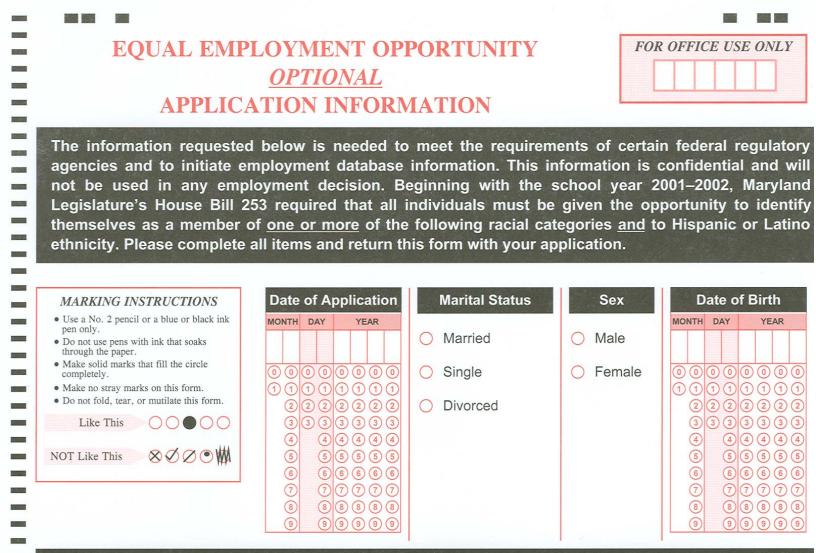
- 8. **Behind-the-Wheel Training** When the CDL permit is obtained and the Transportation Department notified, the applicant will be assigned an instructor to begin behind-the-wheel training. Behind-the-wheel driving time will vary between twenty (20) and forty (40) hours in preparation for the CDL examination. The applicant is not paid for this time. The Commercial Driver's License test is administered at and by the Motor Vehicle Administration. The Transportation Department will schedule the date and the time for the driving test when a driver instructor feels that the applicant has attained the necessary competency to pass the examination.
- 9. <u>Required Certification Classes</u> Driver applicants/attendant applicants are required to attend classes in order to be certified by the Harford County Public Schools. (A schedule of classes is given out at the certification process meeting.) Driver/attendant applicants will be paid an hourly wage for their attendance at these classes, after they are certified and begin work. The Pre-Service Classes are compulsory.

County driver applicants must attend ten (10) hours of Pre-Service Classes, six (6) hours of First Aid/CPR Classes and four (4) hours of Special Needs Pre-Service. Eight (8) hours of Defensive Driving and two (2) hours of Diversity Training are compulsory, although not required for initial certification. (Drivers have twelve (12) months from the date of certification to complete an eight (8) hour NSA Defensive Driving Class along with a two (2) hour Diversity Training Class. Applicants must sign up for these classes.)

Attendant applicants are required to attend four (4) hours of Attendant Pre-Service Classes, six (6) hours of First Aid/CPR Classes and four (4) hours of Special Needs Pre-Service. Two (2) hours of Diversity Training are compulsory, although not required for initial certification. (Attendants have twelve (12) months from the date of certification to complete the two (2) hour Diversity Training Class. Attendants must sign up for this class.)

10. <u>Annual Certification</u> - In order to maintain certification, the Maryland State Department of Education requires that all school bus drivers/attendants attend six (6) hours of In-Service Meetings throughout the year at the Hickory Classroom. Drivers and attendants will be notified by the Transportation Department when these In-Service Meetings will be held. <u>Failure to report</u> to these area meetings will result in <u>decertification</u> as a school bus driver/attendant for the Harford County Public Schools.

If you have any questions concerning the above, please feel free to call the Transportation Department at 410-638-4092.



### **Race/Ethnic Identification**

- American Indian/Alaska Native (Code 1) a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian (Code 2) a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- O Black or African American (Code 3) a person having origins in any of the black racial groups of Africa.
- White (Code 4) a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Native Hawaiian or Other Pacific Islander (Code 5) - a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. The term "Native Hawaiian" does not include individuals who are native to the State of Hawaii by virtue of being born there. In addition to Native Hawaiians, Guamanians, and Samoans, this category would include the following Pacific Islander groups reported in the 1990 census: Carolinian, Fijian, Kosraean, Melanesian, Micronesian, Northern Mariana Islander, Palauan, Papua New Guinean, Pnoapean (Pohnpelan), Polynesian, Solomon Islander, Tahitian, Tarawa Islander, Tokelauan, Tongan, Trukese (Chuukese) and Yapese.

Ethnicity - Hispanic or Latino (yes or no) - a person of Cuban, Mexican, Puerto Rican, Central or South American or other Spanish culture or origin, regardless of race.

