



CHARLESTON R-I SCHOOL DISTRICT

311 E. Tom Brown Street / P.O. Box 39, Charleston, MO 63834 - Phone & Fax: (573) 290-2825

"An Equal Opportunity Employer"

PERSONAL DATA

Last Name:	First:	Middle:	Date of Application:	Date Available:
Email Address:		Secondary Email Address:		
Current Mailing Address:		City:	State:	Zip Code:
Permanent Address (if different):		City:	State:	Zip Code:
Home Phone:	Cell Phone:	Additional / Alternate Phone:		
Have you previously worked for Charleston R-I?		If so, what year(s)?		

LICENSE / DRIVER'S RECORD INFORMATION

*Please submit photocopies of CDL License and Bus Drivers Permit.

CDL License Number:	Expiration Date:		
Do you have a current Missouri School Bus Driver's Permit?			
List any driving restrictions:			
Has your driver's license ever been suspended or revoked? If yes, explain.			
Have you ever had any medical condition that has affected your ability to drive? If yes, explain.			
Are you currently under a doctor's care for any health problem? If yes, explain.			
In case of an emergency, who shall we notify?			
<u>Name:</u>	<u>Relation:</u>	<u>Main Phone:</u>	<u>Alternate Phone:</u>

List below all traffic offenses for which you were convicted during the past five (5) years.

Nature of Offense:	Location:	Year:

List below all accidents that you have had during the past five (5) years.

Nature of Accident:	Location:	Year:

EDUCATION / TRAINING (“SEE RESUME” IS NOT SUFFICIENT):

High School / College / Univ. / Other*:	Date Attended		Date of Graduation:	Degree:	Major:	Minor:	GPA:
	From:	To:					

*Please submit photocopies of college / university transcripts and/or certificates of completion.

DRIVING EXPERIENCE:

From		To		Company Name / Address	Vehicle Type	Phone Numbers
Mo.	Yr.	Mo.	Yr.			

OTHER WORK EXPERIENCE:

From		To		Name / Mailing Address	Position Held	Phone Numbers
Mo.	Yr.	Mo.	Yr.			

EMPLOYMENT REFERENCES (*SEE RESUME" IS NOT SUFFICIENT):

List names of at least four references who can provide information about your driving history.

Full name of Reference	Position	Relation to Applicant	Company	Phone Numbers

ADDITIONAL EMPLOYMENT QUESTIONS:

1. Have you ever been arrested, charged with or convicted of a felony or misdemeanor (excluding traffic offenses)? No / Yes; if the answer is yes, please explain:

2. Have you ever plead guilty to a felony or misdemeanor (excluding traffic offenses)? No / Yes; if the answer is yes, please explain:

3. Have you ever plead guilty to a felony or misdemeanor and been given a suspended imposition of sentence (i.e. where you entered a guilty plea but was not sentenced and placed on probation for a period of time after which the case was dismissed if probation was successfully completed)? No / Yes; if the answer is yes, please explain:

4. Has Missouri Children's Services or a similar agency in any other state or jurisdiction ever issued a determination or finding of cause or reason to believe or suspect that you have engaged in physical, emotional, psychological, or sexual abuse or neglect of a child? No / Yes; if the answer is yes, please explain:

5. Have you ever failed to be re-employed by an educational institution? No / Yes; if the answer is yes, please explain:

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that falsification of this record will be considered sufficient cause for disqualification or, if employed, dismissal. Further, I authorize the Charleston R-I School District to contact the references listed herewith and I release former employers or providers of information any liability as a result of furnishing and receiving this information.

Signature of Applicant

Date