

WEST GENESEE CENTRAL SCHOOL DISTRICT

TRANSPORTATION DEPARTMENT

5203 WEST GENESEE STREET, CAMILLUS NY 13031

315-487-4576 FAX 315-487-4547

QUALIFICATION INQUIRY FOR SCHOOL BUS DRIVERS/ATTENDANT

Name of Applicant: _____ Date of Birth _____

The above person has applied for a position as a School Bus Driver or Attendant in the West Genesee School District. It is understood that you may have knowledge of the character, qualification and fitness of the person named above for this position. We request that you complete this form, answering all of the questions below and the second page as fully and specifically as possible. The information you furnish will be held in strict confidence. Thank you in advance, for completing this for immediately upon its receipt and please return it at once.

Approximately how long have you know the applicant? _____

Have you ever employed or worked with this applicant? _____ Yes _____ No

If yes, please give the company name and address:

Date from: _____ to: _____

What was his/her job during that period? _____

Please circle the qualifying term which most nearly expresses your opinion with respect to the applicant's character and reputation:

OUTSTANDING

GOOD

SATISFACTORY

POOR

Would you employ him/her as a school bus driver or attendant? _____ Yes _____ No

Are you related to the applicant? _____ Yes _____ No

To the best of your knowledge, has he/she ever been discharged or has he/she resigned from any employment after being told his/her conduct or work was not satisfactory? _____ Yes _____ No

If yes, please give the company name and address:

Do you know of any physical impairment of the applicant which would interfere with the performance of his/her duties as a bus driver? _____ Yes _____ No

If yes, please describe: _____

Name of Applicant: _____

How would you characterize the driving habits of the applicant?

_____ Inconsiderate _____ Drives too fast _____ Irresponsible
_____ Room for improvement _____ Tends to show off _____ Inexperienced
_____ Average driver _____ Careful and serious _____ Do not know

Do you know of any motor vehicle accident in which the applicant was involved as a driver?

_____ Yes _____ No If yes, please describe: _____

Do you know of any arrests or convictions of the applicant? _____ Yes _____ No

If you, please describe: _____

How would you characterize the applicant's response to other people?

_____ Friendly _____ Likeable _____ Easy going _____ Serious _____ Easily annoyed
_____ Inclined to argue _____ Hard to get to know _____ Inclined to agree

How does the applicant react to children?

_____ Easy going _____ Firm but fair _____ Easily annoyed _____ Friendly
_____ Would command respect _____ Difficult to control temper _____ Do not know

Would you like to have your children ride on a bus by the applicant? _____ Yes _____ No

Do you know of any reason that the applicant would not be a suitable person to serve as a school bus driver or attendant? _____ Yes _____ No If yes, please describe:

Please give any additional information which may assist us in determining the fitness of this person for the position of school bus driver/attendant:

I hereby certify that I have known the applicant whose name appears on the questionnaire and that the answers to the above questions, with respect to him/her, are true to the best of my knowledge and belief.

Signature: _____ Date: _____