



**EDUCATIONAL RECORD**

School	Name of School	School Location	From Mo/Yr	To Mo/Yr	Highest Grade Completed	Degree (Yes/No) / Major
High			/	/		
Accredited College			/	/		
Trade, TEC, Other			/	/		

MILITARY RECORD Branch	Occupational Specialist (MOS)	Starting Date	Ending Date

**EMPLOYMENT RECORD:** Starting with most recent, please list every employment since your first job; account for periods of unemployment, if any.  
Use separate sheet of paper if necessary.

From Mo/Yr	To Mo/Yr	Employer's Name/Address	Job Title/Duties	Last Salary	Reason for Leaving
/	/			\$	
/	/			\$	
/	/			\$	
/	/			\$	

**PROFESSIONAL REFERENCES REQUIRED:** Please list persons qualified to evaluate your character, experience, and ability. References should be former employers or instructors. If you have ever worked for Greenville County Schools, one reference should be your last location within the district.

Name	Position or Job Title	Mailing Address (Required)	Telephone (Required)

The use of tobacco products in Greenville County Schools is prohibited on all sites.  
The Greenville County Schools does not discriminate on the basis of age, race, sex, color, handicap, religion, or national origin in its dealings with employees, students, the general public, applicants for employment, educational programs, activities, or access to its facilities.

*My signature below indicates that I have completed this application for employment accurately and truthfully. I understand that misrepresentation of factual information is cause for dismissal should I be employed by Greenville County Schools.*

*By my signature, I authorize Greenville County Schools to ask for and obtain from each former or present employer, person, firm, corporation, schools, police, FBI, and drive records given as reference any and all information sought in connection with this application. I also authorize any former employer, person, firm, corporation, school, police, FBI, and driver records from whom such information is requested to supply Greenville County Schools with information concerning my, my work habits, character, skill, and actions, in any transaction.*

Your application will be considered active for six months following the date received.

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

## BUS DRIVER INFORMATION ONLY

Referred by: \_\_\_\_\_

*SDE recommends that information generated by completing this form be retained by employing school district as part of the district's application file and permanent driver file.*

To be completed by prospective school bus drivers and all current school bus drivers applying for license renewal.

Driver's License Information: State \_\_\_\_\_ License Number \_\_\_\_\_

Applicant may be REFUSED admission into the school bus driver training program or a current school bus driver's driving privileges DENIED if the applicant or driver answers yes to the following questions:

1. Have you ever been convicted of a sex offense or crimes of violence involving force on minors?  No  Yes
2. Have you ever been convicted of a crime involving violence, threat of violence, or theft?  No  Yes  
(If yes, please provide date of conviction \_\_\_\_\_).
3. Have you ever been convicted of a crime involving activity in drugs or alcoholic beverages?  No  Yes  
(If yes, please provide date of conviction \_\_\_\_\_).
4. Within the past three years, have you been convicted of any violation involving hit-and-run driving, driving under the influence or intoxicants, reckless driving, fleeing or attempting to elude a law enforcement officer, or failure to perform legal duties of driver involved in an accident or collision that resulted in injury or death of any person?  No  Yes
5. Have you ever been convicted of operating a vehicle in the commission of a felony, involuntary manslaughter, or child endangerment?  No  Yes
6. Within the past three years, has your driver's license been suspended by the Division of Motor Vehicles of any state for a cause involving the unsafe operation of a motor vehicle?  No  Yes
7. Have you ever had your driving privileges revoked or suspended as a habitual offender?  No  Yes
8. Number of points on your driving record at present: \_\_\_\_\_
9. As a valid licensed driver, do you have less than one year of vehicular driving experience?  No  Yes
10. Have you ever been employed as a school bus driver?  No  Yes
11. Have you ever been dismissed from a school bus driver position?  No  Yes

*I certify that the information provided is correct and true to the best of my knowledge. My signature represents consent to release my driving record 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. 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.*

\_\_\_\_\_  
Signature of Applicant / Driver

\_\_\_\_\_  
Date

*I certify that I have carefully evaluated the qualifications of this applicant / driver and recommend the following actions:*

- Applicant / driver be admitted into the South Carolina school bus driver training program. If applicant / driver answered yes to any of the above questions, please use reverse side to provide justification for employment.
- Applicant / driver be rejected for admission into the South Carolina school bus driver training program.

Reason for Rejection:

- Does not possess a valid driver's license
- Bad driving record
- Criminal background
- History of drug / alcohol abuse
- Conviction of a sex offense and / or sex crimes of violence involving force on minors
- Other, explain: \_\_\_\_\_

**AUTHORIZATION**

**As part of the employment  
Schools will obtain a  
on all persons considered**

**FORM**

**process, Greenville County  
criminal background check  
for hire.**

**Please read the following disclosure. provide the  
information requested. sign and date.**

During the application process and at any time during the tenure of my employment with Greenville County Schools, I hereby authorize ChoicePoint Services Inc., on behalf of Greenville County Schools to procure a consumer report (known as an investigative consumer report in California) which I understand may include information regarding my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from credit bureaus, courts record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification; to the extent such investigation includes information bearing on my character, general reputation, personal characteristics or mode of living.

\_\_\_\_\_  
Applicant/Employee Name (please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant/Employee Signature

\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
\* Social Security Number \*

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
\* Date of Birth \*

\* For Identification Purposes Only

**MN & Oklahoma Residents please note:** In connection with your application for employment, your consumer report may be obtained and reviewed. Under Minnesota and Oklahoma law, you have a right to receive a free copy of your consumer report by checking the appropriate box below.

- YES, I am a Minnesota resident and would like a free copy of my consumer report.  
 YES, I am an Oklahoma resident and would like a free copy of my consumer report.

**CA Residents please note:** In connection with your application for employment, your credit report will be obtained and reviewed. Under CA law, you have a right to receive a free copy of your credit report by checking the appropriate box below. Your credit report will be mailed to you by the credit bureau. In the alternative, you may elect to receive the entire investigative consumer report, which will include your credit report.

- YES, I am a California resident and would like a free copy of my credit report; or  
 YES, I am a California resident and would like a free copy of my investigative consumer report.

Printed Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

**FOR OFFICE USE ONLY**

**Employer please note:** If consumer checks "YES" regarding the credit report, and you do request a credit report, please fax this form to your ChoicePoint service center. If consumer checks "YES" regarding the full consumer report, and consumer resides in California, you will need to provide the individual with a copy of their consumer report.

Account Number: \_\_\_\_\_

