

TRANSPORTATION – TEACHER / COACH DRIVER APPLICATION

Name <i>(please print):</i>		
Address / Town:	Postal Code:	
Phone (Home):	Phone (Cell):	
Class of Operator’s Licence:	Licence #:	
If Class 2 or 1, how long have you held this class?		
I am applying to transport students from the following schools:		
Skills / Qualifications: List any special skills and qualifications which you possess that would be an asset for driving school bus (machine and/or equipment operation; licences held; related experience, etc.)		
Prior Work History: List the past 3 years, at minimum, in order of last or present employer first. This information is required by the National Safety Code.		
Dates From (Month / Year)	Dates To (Month / Year)	Name of Employer

Submit application and the following documents to the Director of Transportation:

- Copy of Operator’s Licence
- Driver Abstract Consent (complete/sign Division’s form for processing; do not obtain your own abstract)

**By signing, I acknowledge that I have read and agree to follow Administrative Procedure 567
(Transportation - Teacher / Coach Drivers)**

Teacher / Coach Signature	Date (Month / Day / Year)

Email to transportation@brsd.ab.ca

For Transportation Department use only:	
<input type="checkbox"/> Approved <input type="checkbox"/> Declined	
Director of Transportation signature: _____ Date (M/D/Y): _____	
Once a decision is reached, this form will be sent back to the Applicant and a copy sent to any Principal(s) of “Schools” listed above.	