

USD # 293, QINTER PUBLIC SCHOOL

601 GOVE, PO BOX 540
QINTER KS 67752
785-754-2470

APPLICATION FOR BUS DRIVER

DATE: _____

NAME: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE NO: _____ CELL #: _____

Email: _____

EMPLOYMENT HISTORY (Most recent first)

COMPANY: _____ SUPERVISOR: _____

ADDRESS: _____

Street

City

State

Zip

POSITION HELD: _____ FROM: _____ TO: _____

COMPANY: _____ SUPERVISOR: _____

ADDRESS: _____

Street

City

State

Zip

POSITION HELD: _____ FROM: _____ TO: _____

COMPANY: _____ SUPERVISOR: _____

ADDRESS: _____

Street

City

State

Zip

POSITION HELD: _____ FROM: _____ TO: _____

REFERENCES (Other than relatives or previous employers)

NAME: _____ TELEPHONE: _____

ADDRESS: _____

Street

City

State

Zip

NAME: _____ TELEPHONE: _____

ADDRESS: _____

Street

City

State

Zip

NAME: _____ TELEPHONE: _____

ADDRESS: _____

Street

City

State

Zip

BRIEFLY STATE THE REASONS FOR WANTING A POSITION AS SECRETARY:
