

COMPLETE ONLY IF APPLYING FOR BUS DRIVER POSITION

CLASS OF DRIVER'S LICENSE: _____ EXP. DATE: _____

MOTORIST IDENTIFICATION NUMBER: _____

D.O.B.: _____ STATE OF LICENSE: _____

HAVE YOU HAD ANY ACCIDENTS WHILE DRIVING DURING THE PAST FIVE YEARS?:

YES _____ NO _____. IF YES, DESCRIBE EXTENT OF ACCIDENT(S): _____

HAVE YOU BEEN CONVICTED OF ANY MOVING TRAFFIC VIOLATIONS (RECKLESS DRIVING, SPEEDING, ETC.) IN THE PAST FIVE (5) YEARS? YES ___ NO ___

IF YES, GIVE THE FOLLOWING INFORMATION:

DATE	CHARGE	COURT AND LOCATION
_____	_____	_____
_____	_____	_____
_____	_____	_____

DO YOU HAVE ANY PHYSICAL HANDICAPS? YES _____ NO _____ IF YES, PLEASE EXPLAIN: _____

ACTIVE DRIVING EXPERIENCE: _____ YEARS

LIGHT TRUCK OR STATION WAGON: _____ YEARS

PASSENGER BUS OR HEAVY TRUCK: _____ YEARS

DO YOU USE INTOXICANTS/DRUGS? _____ FREQUENTLY, _____ SELDOM, _____ NEVER

SIGNED: _____

ALL STATEMENTS ARE SUBJECT TO VERIFICATION

Section 50-b of the New York State Civil Service Law requires that all applicants for examination be asked the following questions:

1. Have you any loans made or guaranteed by the New York State Higher Education Services Corporation which are currently outstanding? Yes No

2. If so, are you presently in default on any such loan?
 Yes No

Name: _____
 (Last name, first name, middle initial)

Address: _____

City, State, Zip: _____