Excellent Opportunity! Will Train/No Experience Needed

Salary Rate: $22.07/hr. for full availability
$21.02/hr. for half availability

Applications are currently being accepted for substitute school bus drivers. Once certified as a school bus driver you may apply for a salaried, fully-benefitted school bus driver position with paid premiums for you and your qualified dependents; Social Security and PERS retirement; sick leave and vacation and 14 paid holidays.

APPLICATION PROCEDURE: Application packets may be obtained at the Transportation Center, 4710 Cardin St, San Diego 92111. Please check-in with Administration, Monday through Friday, from 7:00 am to 4:00 pm. Completed applications are submitted to Administration for review and processing. Once processed, applicants will be contacted and scheduled for Orientation Class.

WORKING HOURS: Candidates must be available Monday through Friday for the same hours each day, during either a morning (5:00 am to 10:30 am) or afternoon (11:00 am to 6:00 pm) shift, or both. Shifts vary daily, from two to six hours. Assignments continue throughout the school year on all regular public school days.

MINIMUM QUALIFICATIONS:
- Physical ability to lift disabled students in and out of restricted spaces.
- Ability to safely operate a motor vehicle
- Knowledge of state and local traffic laws.
- Ability to read a map and learn San Diego city streets.
- Ability to read a bus schedule.
- Ability to follow written and oral instructions.
- Ability to communicate effectively.
- Personality and character traits suited to supervision and care of children of multiple ethnicity and cultural values, behavioral, and physical disabilities.
- Ability to resolve conflict and maintain discipline of children on board school buses.
- Must be at least 18 years of age to apply.
- No felony convictions.

NOTE: Applicants are required to undergo pre-employment substance abuse testing. The school bus driver position is a safety-sensitive job class and subject to random selection for alcohol and/or substance abuse testing.

LICENSES: 1. Must have a valid California Driver’s License. Any moving citations or chargeable accidents in the applicant’s driving history within 37 calendar months prior to the application filing date will be evaluated and may be considered disqualifying. 2. Ability to qualify for the California School Bus Driver Certificate and a Department of Transportation Medical Certificate. This requires the successful completion of a State of California course of instruction conducted periodically at the Transportation Center according to District need.

SELECTION PROCEDURE: Employment as a substitute school bus driver will depend upon meeting the minimum qualifications state above, successful completion of the stated required course, and certification by the California Highway Patrol.
APPLICATION
CLASSIFIED

SAN DIEGO UNIFIED SCHOOL DISTRICT
HUMAN RESOURCE SERVICES DIVISION
EDUCATION CENTER
4100 Normal Street, Room 1241
San Diego, CA 92103-2682
(619) 725-8195
www.sandi.net

APPLICATION
CLASSIFIED

POSITION FOR WHICH YOU ARE APPLYING ____________________________

PERSONAL INFORMATION

Last Name
First Name
Middle Name
Social Security Number

Mailing Address
City
State
Zip Code

Home Phone
Business Phone
Cell Phone

E-mail Address:

FOREIGN LANGUAGE SKILLS

<table>
<thead>
<tr>
<th>LANGUAGE</th>
<th>READ (YES or NO)</th>
<th>WRITE (YES or NO)</th>
<th>SPEAK (YES or NO)</th>
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GENERAL INFORMATION

Do you have a California driver’s license? License No. ________________
☐ Yes ☐ No

Are you a veteran?
☐ Yes ☐ No
(If yes, please attach a copy (not original) of DD214 Form.)

With or without an accommodation, are you able to perform the essential functions of this position?
☐ Yes ☐ No

Are you 18 years of age or older?
☐ Yes ☐ No

If hired, can you provide the documents required to prove that you are authorized to work in the United States?
☐ Yes ☐ No

Have you ever been employed by the San Diego Unified School District?
☐ Yes ☐ No

If yes, give dates and reason for leaving:

Are you related by birth or marriage to any person now employed by the San Diego Unified School District? If yes, list name, relationship, and location of each:
☐ Yes ☐ No

I affirm that the statements provided are true and complete to the best of my knowledge. If I misrepresent or deliberately omit a fact in this application and/or in any documents attached to this application, I may be refused employment or, if employed, I may be terminated.

__________________________________________
(Signature of Applicant)

__________________________________________
(Date)

HR File
NAME ______________________________

EDUCATIONAL AND PROFESSIONAL TRAINING

<table>
<thead>
<tr>
<th>DEGREE/LICENSE/CERTIFICATE</th>
<th>INSTITUTION</th>
<th>LOCATION (CITY AND STATE)</th>
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A copy of degrees/licenses/certificates relative to the school bus driving industry must be attached to this application.

EMPLOYMENT HISTORY

Beginning with recent/current employment, account for all periods of employment for at least 10 years. List additional employment history if there is significant experience to report. Reference to a resume will not be accepted in lieu of completing this form.

<table>
<thead>
<tr>
<th>EMPLOYER INFORMATION</th>
<th>DATES OF EMPLOYMENT AND SALARY</th>
<th>JOB TITLE AND DUTIES</th>
<th>REASON FOR LEAVING</th>
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<tbody>
<tr>
<td>Employer Name</td>
<td>FROM: (Month/Year)</td>
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<tr>
<td>Address</td>
<td>TO: (Month/Year)</td>
<td>Salary</td>
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<td>Phone</td>
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| Employer Name        | FROM: (Month/Year) |                        |                   |
| Address              | TO: (Month/Year)  | Salary                |                   |
| Phone                |                   |                       |                   |

| Employer Name        | FROM: (Month/Year) |                        |                   |
| Address              | TO: (Month/Year)  | Salary                |                   |
| Phone                |                   |                       |                   |

| Employer Name        | FROM: (Month/Year) |                        |                   |
| Address              | TO: (Month/Year)  | Salary                |                   |
| Phone                |                   |                       |                   |

PROFESSIONAL REFERENCES

<table>
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<tr>
<th>NAME</th>
<th>JOB TITLE/INSTITUTION</th>
<th>PHONE</th>
<th>E-MAIL</th>
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CONVICTION REPORT FORM

The District’s responsibility to school children and the public, and provisions outlined in the California State Education Code Sections 45123 and 45124, require that we request the following information. A record of conviction does not prohibit you from applying for employment with The San Diego Unified School District. However, failure to complete this form or to provide the requested information accurately and honestly will disqualify you from further consideration for employment or will result in dismissal from employment. Any questions regarding the requested information may be asked of the Director, Human Resources or the Executive Director, Human Resources, through staff assistants or in a scheduled appointment.

All persons offered positions with the San Diego Unified School District are required to be fingerprinted at the District Live Scan Office and the fingerprints are forwarded to the Department of Justice for processing (Education Code Section 45125). The fee for fingerprinting and processing must be paid by each new employee.

Any employment offered is contingent upon a review of your criminal record. Unacceptable convictions will disqualify you for employment with the San Diego Unified School District.

Please read the questions below carefully and answer every question. Falsifying or omitting information may result in your offer of employment being withdrawn.

PLEAS PRINT CLEARLY

1. Name: (Last)________________________ (First)________________________ (Middle)___________
   AKA: (Last)________________________ (First)________________________ (Middle)___________

2. Date of Birth: (Month)________________________ (Day)________________________ (Year)__________

3. Social Security Number: _____ _____ _____ -- _____ _____ -- _____ _____ _____

4. Do you have any criminal charges against you? □ Yes □ No

5. Have you ever been convicted* of a misdemeanor? □ Yes □ No

6. Have you ever been convicted* of a felony? □ Yes □ No

7. Have you ever been convicted* of a sex or drug related offense? □ Yes □ No

8. Have you marked and of the boxes above “Yes”? If so, you must provide detailed information on the additional page on this form.

9. Have you lived in California for the past 12 months? □ Yes □ No

*Conviction includes a finding of guilty by a court in a trial with or without a jury or a plea or verdict of guilty.

I have answered all the questions and provided information on the additional page truthfully, to the best of my knowledge. (If you are in doubt regarding any of these questions, please for clarification.

_________________________________________  ___________________________________________
SIGNATURE                                      DATE
<table>
<thead>
<tr>
<th>DATE</th>
<th>CHARGE</th>
<th>DISPOSITION</th>
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**CHARGE:** Name of the charge. Do not use Penal Code section numbers only.

**DISPOSITION** *(Results)*: Amount of fine, how long in jail or prison, length of probation.
San Diego Unified School District
TRANSPORTATION SERVICES DEPARTMENT
4710 Cardin Street, San Diego, CA 92111
ATTN: Daniel Gilbreth, Operations Manager

Neighborhood Schools & Enrollment Options

REQUEST FOR INFORMATION
ALCOHOL & CONTROLLED SUBSTANCE TESTING RECORDS

San Diego Unified School District is in receipt of an employment application for a position requiring a commercial driver’s license. The Federal Highway Administration 49CFR, et al. requires that an employer shall obtain, pursuant to the individual’s consent, information on alcohol tests with a concentration result of 0.04 or greater, positive controlled substances test results, and refusals to be tested, within the preceding two years, which are maintained by the driver’s previous and/or current employer(s). Completed forms may be faxed or mailed per the contact information listed above.

APPLICANT INFORMATION

<table>
<thead>
<tr>
<th>Name:</th>
<th>SSN:</th>
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</thead>
<tbody>
<tr>
<td>Have you been employed as the operator of a commercial motor vehicle within the past 24 months?</td>
<td>□ YES □ NO</td>
</tr>
<tr>
<td>If NO: There is no further information required on this application; please sign as complete.</td>
<td>Signature:</td>
</tr>
<tr>
<td>If YES: I am applying for the position of school bus driver and authorize the release of my information from the employer listed below. I understand I must submit one form for each employer for whom I operated a commercial motor vehicle within the past 24 months.</td>
<td>Signature:</td>
</tr>
<tr>
<td>Employer:</td>
<td>Phone:</td>
</tr>
<tr>
<td>Address:</td>
<td>Employed From/To:</td>
</tr>
</tbody>
</table>

EMPLOYER RESPONSE: Within the last 24 months did the individual listed above:

<table>
<thead>
<tr>
<th>Test positive for a controlled substance?</th>
<th>□ YES □ NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have an alcohol test with a Breath Alcohol Concentration of 0.04 or greater?</td>
<td>□ YES □ NO</td>
</tr>
<tr>
<td>Refuse a DOT mandated test for controlled substances or alcohol?</td>
<td>□ YES □ NO</td>
</tr>
<tr>
<td>Commit any other violations of DOT drug and alcohol testing regulations?</td>
<td>□ YES □ NO</td>
</tr>
<tr>
<td>Participate in a controlled substances or alcohol rehabilitation program?</td>
<td>□ YES □ NO</td>
</tr>
</tbody>
</table>

If the response to any previous question is YES, please provide the Substance Abuse Professional (SAP):

Name: __________________________ Phone: ( ) _____________ Address: __________________________

If the response to any previous question is YES, please provide the Substance Abuse Professional (SAP):

Name: __________________________ Phone: ( ) _____________ Address: __________________________

Person Completing Form: __________________________ Name __________________________ Title __________________________

Phone: ( ) _____________ Signature: __________________________ Date: __________________________
AUTHORIZATION TO RELEASE INFORMATION

NAME: _______________________________________

OTHER NAME(S) USED: _____________________________

DATE OF BIRTH: ________________________________

SOCIAL SECURITY NUMBER: _______________________

I authorize your organization to permit the review, release, or duplication of information required by the Transportation Department official(s) of the San Diego Unified School District. Information requests may include, but is not limited to, medical and employee records, personnel files, background checks, internal investigation files and training records.

I absolve your organization from any liability of damage which may result from the release of my information to the San Diego Unified School District.

A photocopy of this signed release form shall serve as an original authorization for a period of 24 months from the date I entered below:

Signature:_______________________________________Date: _____/_____/
San Diego Unified School District requires school bus driver applicants to submit to a pre-employment physical examination and a pre-employment drug test prior to an offer of employment. The costs of these mandatory pre-employment tests are incurred by the District.

Additionally, a pre-employment query will be submitted to the Drug and Alcohol Clearinghouse if you currently hold, or formerly held a commercial driver’s license. If the Clearinghouse reports drug and/or alcohol violations were submitted by a previous employer, you will not be offered employment.

Please indicate your CDL status:

☐ I currently possess a commercial driver’s license
☐ I formerly held a commercial driver’s license
☐ I have never held a commercial driver’s license

As an applicant for the school bus driver position, I understand:

➢ If I test positive for drugs at any point during the pre-employment process I will not be considered for the position of school bus driver with the Transportation Services Department.

➢ Failure to complete and sign this form disqualifies me from this employment process.

My signature serves as my consent to a physical examination and urinalysis drug test performed by a physician determined by the San Diego Unified School District.

PRINT NAME: _______________________________________

SIGNATURE: _______________________________ DATE: ____________________
EMPLOYER PULL NOTICE (EPN) AUTHORIZATION

I understand the San Diego Unified School District participates in the DMV Employer Pull Notice (EPN) Program and the completion of this form authorizes the Transportation Department to access my driving record information with the California State Department of Motor Vehicles. This information will be on file for Motor Carrier review.

San Diego Unified School District
TRANSPORTATION SERVICES DEPARTMENT
4710 Cardin Street, San Diego, CA 92111
Phone: (858) 496-8460
Fax: (858) 496-8700

Neighborhood Schools & Enrollment Options
General Consent for Limited Queries of the Federal Motor Carrier Safety Administration (FMCSA) Drug and Alcohol Clearinghouse

I,_____________________, hereby provide consent to San Diego Unified School District to conduct a limited query of the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse to determine whether drug or alcohol violation information about me exists in the Clearinghouse. The term extends for the duration of my employment and includes, but is not limited to, annual queries.

I understand that if the limited query conducted by San Diego Unified School District indicates that drug or alcohol violation information about me exists in the Clearinghouse, FMCSA will not disclose that information to San Diego Unified School District without first obtaining additional specific consent from me.

I further understand that if I refuse to provide consent for San Diego Unified School District to conduct a limited query of the Clearinghouse, SDUSD must prohibit me from performing safety-sensitive functions, including driving a commercial motor vehicle, as required by FMCSA's drug and alcohol program regulations.

________________________________________  ______________________
Print Name                                      Date

________________________________________
Signature
A valid California driver’s license is required to apply for a school bus driver position with San Diego Unified School District. The Transportation Department official will photo copy your California driver’s license and forward information to the Department of Motor Vehicles (DMV). Please do not attach a personal photo copy to this application.
Start your New Career as a School Bus Driver

San Diego Unified School District operates 1,438 routes on a daily basis. Our drivers are responsible for providing safe and efficient service to all students.

Starting salary:
$22.07/hr. for full availability
$21.02/hr. for half availability

Working Hours: Candidates must be available Monday through Friday for the same hours each day, during either a morning (5:00 am to 10:30 am) or afternoon period (11:00 am to 6:00 pm), or both.

1. How do I apply for the school bus driver training program?
   a. Download the Substitute Bus Driver Application located on the SDUSD’s Transportation Website.
   b. Obtain and print your DMV K-4 Driver's Record from https://www.dmv.ca.gov/
   c. Contact Transportation Services Office at 619-496-8701 or at transportation@sandi.net to reserve a spot at our weekly New Hire Orientation.
   d. Complete and return your application to Transportation Services Office on your scheduled orientation date.

Address: Transportation Services, 4710 Cardin St. San Diego, CA 92111

Note: Your Driver's Record must be attached to your application. Applications will not be processed until Driver's Records are received.


The New Hire Orientation will provide an overview of SDUSD Employee Benefits, Bus Driver job duties and expectations, a physical agility test, and a brief review of your driving record. Be sure to wear appropriate clothing, you will simulate evacuating a student off a school bus by carrying an eighty-pound bean bag up and down the steps. If you are successful on the physical agility test and driving record sections, you will be scheduled for the next training class.

3. Begin Classroom Training

Attend first class. This class will prepare you to pass the DMV General Knowledge test to obtain a learning permit for the B class Commercial Driver license. This class will be three four-hour classes, 15 hours. You will be in paid status, training wage $15.00 per hour. During the first week you will:

   a. Complete the TB test and San Diego Unified HR Live Scan (paid for by new employee)
      i. Skip the TB test if you have a negative TB test dated within six months
   b. Complete the DOT physical examination (scheduled and paid for by Transportation)
   c. Complete the DMV Commercial Driver license training
   d. Test and review on Commercial Driver license general knowledge
   e. Take DMV test for B class Commercial Driver license learning permit
      i. Meet at DMV with Transportation Safety and Training staff also paid for by Transportation)
4. School Bus Driver In-Class Instruction

Attend second class. This class will give you all the information needed to successfully transport students to and from school. This will be a total of six classes over six days for a total of 36 hours. You will be in paid status, training wage $15.00 per hour. Upon successful completion of the In-Class instruction you will be scheduled for Behind-the-Wheel Training.

   a. During this time you will go to CHP for a background investigation interview and a Department of Justice Live Scan (paid for by Transportation)
   b. You will also provide a sample to perform a pre-employment drug test (paid for by Transportation)

5. Behind-the-Wheel Training (BTW)

You will be taught by our State-Certified Instructors on how to safely operate our vehicles. Instruction will be conducted one on one in a School Bus. BTW training is approx. 40 hours. You will be in paid status, training wage $15.00 per hour. Upon successful completion of the BTW training you will be scheduled for written testing with the CHP.

6. CHP Written Tests

You will be tested on Rules & Regulations governing School Bus transportation and First Aid knowledge. This testing will be based on the information taught during your in-class instruction. Once you pass both exams you will be scheduled for your CHP drive test. Testing fees paid for by Transportation.

7. CHP Drive Test

With a CHP officer or Motor Carrier staff member you will be tested on your knowledge of and ability to demonstrate proper vehicle pre-trip, basic mechanical components, and passenger transport procedures. Your ability to safely drive a commercial vehicle will also be evaluated. This test will take place in a school bus with the testing personnel aboard as you drive through the city. The testing course will be determined in real time by the testing personnel. Equipment will be provided by Transportation.

   a. Before meeting with the CHP officer you will perform an pre-employment Alcohol Breathalyzer test (paid for by Transportation)

8. Your School Bus Certificate

If you successfully pass your drive test you will receive your temporary school bus certificate. You are now a licensed school bus driver. Once certified as a School Bus Driver, you may apply for a salaried and fully benefited position with paid holidays, sick leave and vacation.