

## Bus Drivers: An integral part of every school

- Do you enjoy working with children?
- Do you enjoy flexibility of employment?
- Would you appreciate a consistent source of income?
- Do you want to contribute to your community?
- Do you want to be a part of a dedicated team of professionals?

If you answered "YES" to any of these questions then bus driving may be the career for you.

Climb aboard and prepare for a great ride!

### COSTS ARE COVERED

As a new trainee, Northland will organize the training and will pay (or reimburse) the costs for you to obtain the appropriate class of license, including:

- ▶ Driver Training
- ▶ Driver Medical
- ▶ Written Test
- ▶ Road Test
- ▶ License Upgrade
- ▶ Travel expenses



## Benefits of becoming a School Bus Driver

- ▶ Free Training
- ▶ Competitive Wages
- ▶ Medical Benefits
- ▶ Life Insurance
- ▶ Comprehensive personal and sick leave
- ▶ Employee Assistance Program
- ▶ Service Bonus
- ▶ Long Service Increments
- ▶ Take your bus home with you
- ▶ Pay all summer
- ▶ First Aid Training
- ▶ Driver Medical
- ▶ License Renewal
- ▶ Bring your pre-school aged children with you
  - ▶ Children must be of age and size to allow for forward facing car seats.

*\*Some conditions apply for spare drivers\**



# WE ARE HIRING

Northland School Division

School Bus Drivers

1-800-362-1360



**PURPOSE OF FORM:** To be completed when individuals are applying for a bus driver position. **EMAIL FORM TO:** [Transportation@nsd61.ca](mailto:Transportation@nsd61.ca)

**PERSONAL**

Surname: \_\_\_\_\_ Given Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_ Cell Phone: (    ) \_\_\_\_\_

Email \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Province: \_\_\_\_\_

Condition Codes: \_\_\_\_\_ Class: \_\_\_\_\_

Do you presently have any demerits on your license?  Yes  No

Have you ever completed a Driver Training Course?  Yes  No

**EDUCATION**

Circle the highest grade completed:      8      9      10      11      12

**DRIVING EXPERIENCE**

Light Trucks \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

Heavy Trucks \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

Conventional Bus \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

Transit Bus \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

**EMPLOYMENT EXPERIENCE**

Beginning with your most recent or current employer, please provide the following information about each employer. (If additional space is required, kindly attach additional information or resume.)

|    | Name of Employer | Dates of Employment |    | Employer's Address | Job Title | Supervisor's Name |
|----|------------------|---------------------|----|--------------------|-----------|-------------------|
|    |                  | From                | To |                    |           |                   |
| 1. |                  |                     |    |                    |           |                   |
| 2. |                  |                     |    |                    |           |                   |
| 3. |                  |                     |    |                    |           |                   |
| 4. |                  |                     |    |                    |           |                   |

**The above information is true to the best of my knowledge.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

Attach: \_\_\_\_\_

Resume with References  
Driver's Abstract Consent Form

Copy of Driver's License

*In accordance with the Freedom of Information and Protection of Privacy Act, the following information is being collected under The Education Act to determine eligibility for employment with the division. If you have any questions about the collection of this information, you may contact the Secretary-Treasurer of Northland School Division at 9809-77th Avenue, Peace River, Alberta T8S 1C2, Phone: 780-624-2060, Fax: 780-624-5914.*



**Driver Abstract Consent**

Public (when completed)

In accordance with s.33(c) of the *Freedom of Information and Protection of Privacy Act*, the *Traffic Safety Act*, and the *Access to Motor Vehicle Information Regulation*, specific personal information is collected to confirm the identity of the consenting individual, to uniquely identify the consenting individual on the Registrar's system to produce the information product, and to confirm the identity of the recipient and of the authorized employee of the recipient (if the recipient is an organization). The information is collected to monitor and audit the release of information and to conduct investigations if the Registrar receives complaints about the release. Questions about the collection of this information can be directed to a Service Alberta Information Officer at 780-427-7013, toll free 310-0000 within Alberta. Alternatively, questions may be mailed to Box 3140, Edmonton, AB T5J 2G7, attention Data Access and Contract Management Unit (DACMU).

**A "Driver Abstract" is the product name under which the Alberta Government releases specific information from a person's driving record, which contains:**

- **Name**                      • **Height**                      • **Class**                      • **Licence Number**                      • **Expiration Date**
- **Address**                      • **Weight**                      • **Issue Date**                      • **Current Demerit Points**                      • **Reinstatement**
- **Date of Birth**                      • **Sex**                      • **MVID Number**                      • **Suspended Status**                      • **conditions (if any)**
- **List of violations (Descriptions, Demerit / Merit Points and Suspension Term)**
- **A Commercial Driver Abstract (CDA) includes Commercial Vehicle Safety Alliance Inspection (CVSA) information and all of the above information with the exception of date of birth, height, weight, and sex.**

**PART 1**

I, \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_  
Full Name Full Address

declare that my Driver's Licence Number is: \_\_\_\_\_, my Date of Birth is: \_\_\_\_\_, \_\_\_\_\_  
month by name, day, year

and I give consent for my:     3 Year,     5 Year,     10 Year Driver Abstract (SDA),  
    3 Year,     5 Year,     10 Year Commercial Driver Abstract (CDA),  
to be released, for the period specified under the subsection 5(1)(a), 5(1)(b)(iii) or 5(1)(b)(v) of AMVIR listed below,

to \_\_\_\_\_ The Northland School Division \_\_\_\_\_ of \_\_\_\_\_ 9809 - 77th Ave, Peace River, AB T8S 1C9  
Name of the person / organization receiving the driver's abstract Full Address

In accordance with the *Alberta Motor Vehicle Information Regulation (AMVIR)* (choose **one** of the following subsections):

**5(1)(a) driver's abstract released to a person known by myself**

I acknowledge that the above individual is personally known to me, is not acting as an agent or employee of any other person in this transaction, and is not compensated in any manner for receiving or transferring the driver's abstract to myself.

NOTE: This consent is valid for one month after the consent is dated and the information product released cannot be faxed by the registry agent.

**5(1)(b)(iii) driver's abstract released to my employer or prospective employer**

NOTE: This consent is valid for three months after the consent is dated if it is used by a prospective employer. This consent is valid for three years from the date it is dated or for the length of the employment whichever is shorter if it is used by the current employer. The information product released can be faxed by the registry agent only to the Employer signing PART 2.

**5(1)(b)(v) driver's abstract released to a lawyer representing me**

NOTE: This consent is valid for three months after the consent is dated. The information product released can be faxed by the registry agent only to the Lawyer signing PART 2.

I agree that Alberta Registries and/or the registry agent are not liable for any damages or losses however caused, in respect to any defect, error or omission in the driver's abstract, or use of the driver's abstract by the person receiving it.

\_\_\_\_\_  
Date Signature

**PART 2 - Declaration for Faxing (This does not apply to subsection 5(1)(a) above)**

I / We, \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_  
Name of Employer or Lawyer Address  
request the driver's abstract, as mentioned above, to be faxed to \_\_\_\_\_  
Fax Number (include area code)

I/We agree that Alberta Registries and/or the registry agent are not liable for any privacy breach after the driver's abstract has been faxed to the above number.

\_\_\_\_\_  
Date Signature of Employer or Lawyer



# Northland School Division No. 61 Driver Information Sheet

The information provided below is for Northland School Division No. 61 records only.

## **Driver Information:**

Driver Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
Home #: \_\_\_\_\_  
Work #: \_\_\_\_\_  
Cell #: \_\_\_\_\_  
Email Address: \_\_\_\_\_

## **Vehicle Applying to drive:**

### **1) Divisional Vehicle**

Position Title: \_\_\_\_\_

*Please Attach: a) Driver's Abstract Consent (Form G005a)  
b) Copy of valid Driver's License*

### **2) School Bus**

School assigned to: \_\_\_\_\_

Route Number: \_\_\_\_\_ or Casual Bus Driver?  SIN #: \_\_\_\_\_  
Do you have First Aid Training? Yes  No

*Please Attach: a) Copy of Driver's Abstract Consent (Form G005a)  
b) Copy of valid Driver's License  
c) Copy of First Aid Certificate*

### **3) Personal Vehicle**

School assigned to: \_\_\_\_\_

Position Title: \_\_\_\_\_

*Please Attach: a) Driver's Abstract Consent (Form G005a)  
b) Copy of Valid Driver's License  
c) Copy of Insurance statement showing \$2 Million Liability. Statement must include policy expiry date.*

***Please return to the Transportation Department via fax to (780) 618-3143***

*If you have any questions, please contact Susanne Jones (780) 624-2060 ext. 6172*