

Guardian Angels Central Catholic Bus Driver Application

INFORMATION

Name:			
Address:			
City:		State:	Zip:
Cell Phone:	Email:		
Current Place of Employment	t:		
Nebraska License #			
	CERT	IFICATIONS	
Current Nebraska CDL or Beh	ind the Wheel ELDT trai	ning? Yes or I	No
Current Nebraska Bus Endors	sement for 16 passenger	+? Yes or No	
Are you currently registered	with the Nebraska Pupil	Transportatio	n database? Yes or No
Have you completed the Leve	el I Training with the Ne	braska Safety (Center? Yes or No
Have you completed the Leve	el II Training with the Ne	braska Safety	Center? Yes or No
**If you answered NO to any	of the above, are you w	villing to comp	lete the required training?
Yes or No			
Verification of completion of Date	,		•
**This training is required by	the Archdiocese of Om	aha for all Cath	holic School employees and volunteers
	AVA	<u> </u>	
Are there any days you are U	NABLE to drive?		
Is there a limit to the number	r of days you can drive i	n a week?	
	• •		
Other limitations?			
Signature:			Date:

Return Application to: GACC High School

419 E. Decatur St. West Point, NE 68788