



# *Monroe School Transportation*

## **Qualification for Bus Monitor**

1. At least 19 years of age
2. Submit 3 character references
3. Be able to pass physical performance test
4. Be able to pass drug and alcohol test
5. Complete all training requirements, including a 3 hours pre-service training class plus On-Bus Training

A monitor is responsible for the safe and efficient transportation of children on regular assigned routes. He/She must use good judgment in the care of children and follow the directives set forth by New York State Commissioner of Education, the Dept. of Transportation, The New York State Department of Motor Vehicles and Monroe School Transportation, Inc. policies.

**This is a part-time job. Twenty hours (20) per week (when school is in session), two (2) hours in the morning and two (2) hours in the afternoon.**

## **Specific Duties**

1. Assist the driver in providing a safe trip for students at all times.
2. Wear the safety vest while performing their duties.
3. Exit the bus each and every time a student is entering or existing.
4. Cross students when necessary.
5. Through his/her own conduct to set a desirable standard of courtesy and orderliness for the students to follow.
6. To keep a good appearance generally.
7. To assist the driver in backing procedures by getting off the bus and guiding the driver.
8. To work as a team with the driver.
9. To assist the driver in keeping a clean, neat and orderly bus.
10. To assign seats to students when necessary.
11. Keep the noise level down a much as possible.
12. Help to maintain reasonable behavior on the bus.
13. Learn the route and assist substitute drive.
14. Wear ID when on duty.
15. Must punch in at scheduled start time and remain on the clock and available to work until scheduled punch-out time.

Employment may be determined at the discretion of management for failure to observe laws, rules and regulations set forth by various governing agencies and Monroe School Transportation, Inc.

# Application for Employment

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
 Last First Middle

Address \_\_\_\_\_  
 Street City State Zip Code

Telephone # (\_\_\_\_) \_\_\_\_\_ Mobile/Beeper/Other Phone # (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Referral Source (How did you hear about us?) \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (Required by NYSED)

Have you ever been employed here before? If YES, give dates and positions \_\_\_\_\_  Yes  No

Are you legally eligible for employment in this country? \_\_\_\_\_  Yes  No

Date available for work \_\_\_\_ / \_\_\_\_ / \_\_\_\_ What is your desired salary range? \_\_\_\_\_ \$ \_\_\_\_\_

Type of employment desired:  Part Time This is only a part time job. 20 hours a week

Driver's license number if driving may be required in position for which you are applying \_\_\_\_\_ State \_\_\_\_\_

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? \_\_\_\_\_  Yes  No

If yes, please provide the date(s) and details \_\_\_\_\_

## Employment History

Starting with your most recent employer, provide the following information.

Employer	Telephone #	Dates employed: Month / Year to Month / Year
Street Address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?		Compensation (Final)
		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
		Commission/Bonus/Other Compensation \$
Summarize the type of work performed and job responsibilities.		
What did you like most about your position?		
What were the things you liked least about the position?		

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Street Address	City State	Compensation (Starting)
Starting job title/final job title		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Commission/Bonus/Other Compensation \$
Why did you leave?		Compensation (Final)
		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
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		<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
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Summarize the type of work performed and job responsibilities.		
What did you like most about your position?		
What were the things you liked least about the position?		

**Skills and Qualifications**

Summarize any special training skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

**Computer Skills**(Check appropriate boxes. Include software titles and years of experience.)

Word Processing \_\_\_\_\_ Years: \_\_\_\_\_  E-mail \_\_\_\_\_ Years: \_\_\_\_\_

Spreadsheet \_\_\_\_\_ Years: \_\_\_\_\_  Internet \_\_\_\_\_ Years: \_\_\_\_\_

Presentation \_\_\_\_\_ Years: \_\_\_\_\_  Other \_\_\_\_\_ Years: \_\_\_\_\_

**Educational Background**

Starting with your most recent school attended, provide the following information.

School (through City and State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		

**References**

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known
			( )	
			( )	
			( )	

**Applicant Statement**

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

*Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.*

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. \_\_\_\_\_ YES \_\_\_\_\_ NO

I certified that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_



# MONROE SCHOOL TRANSPORTATION INC.

## PRE - EMPLOYMENT STATEMENT

(PLEASE READ CAREFULLY AND SIGN THE STATEMENT BELOW)

1. Any offer employment I may receive from Monroe School Transportation is contingent upon my successful completion of the company's total pre-employment screening process, including the company's receiving references that it considers satisfactory, and my satisfactory completion of any pre-employment medical examination that the company may require. I also agree, if employed, to submit to a medical exam at any time at the company's request. I hereby consent to having the results of any pre-employment or post-employment medical exams I may be required to take disclosed to Monroe School Transportation.
2. I understand that as a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, I may be required to submit to an alcohol or drug screening at any time at the discretion of Monroe School Transportation. I hereby consent to having the results of any such alcohol or drug screening I may be required to undergo disclosed to Monroe School Transportation. I further understand that my failure to successfully pass any alcohol and/or drug screening during my employment or violation of the prohibition of the use of alcohol and/or prohibited and/or illegal drugs while working in the course of employment may result in my termination.
3. In processing my application for employment, the company may verify all the information provided by me, or may procure or have prepared a consumer or an investigative consumer report for this purpose concerning my prior employment, military record, education, character, general reputation, personal characteristics, criminal record, and mode of living. I understand that upon written request to the company, I will be informed of whether an investigative consumer report was requested and given full information as to the nature and scope of this investigation.
4. I authorize and request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damage arising from furnishing the requested information.
5. In consideration of my employment, I agree to comply with the policies, rules, regulations and procedures of the company and understand that my employment can be terminated with or without cause or notice, at any time, at the option of either the company or myself. I further understand that no manager or representative of the company, other than the President, General Counsel, or Vice President, has any authority to enter into any agreement different from or contrary to the foregoing. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and one of the individuals designated above.

\_\_\_\_\_  
Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date