

ARROWHEAD DAY CAMP

**240 Dutton Mill Road
West Chester, PA 19380-6601
(610) 644-1435**

Date Mailed _____

Received by Camp _____

Referred By _____

BUS DRIVER APPLICATION

(Print or type)

Last Name

First Name

Address

City

State

Zip

Drivers License #

State issued

Home Phone

*Cell Phone

Date of Birth

Marital Status (Optional)

CURRENT EMPLOYMENT

Do you currently drive for a school district? _____ yes _____ no

If yes, which school district? _____

Length of employment _____

Please give the names of 2 references and phone numbers. Strong preference is for former employers - no relatives.

Name	Position	Phone number
_____	_____	_____
_____	_____	_____

Must have current drivers license, CDL, physical form along with child abuse and criminal check clearances. Copies of these will need to be submitted for employment.

Please know that the camp is 8 weeks in length – Mon. 6/17 thru Fri. 8/9 (off Thursday, 7/4) - for a 39 day season – must commit to the entire 8 week camp season.

Signature _____

