

Go Driving School, LLC Driver's Education Instructor Application

To create a safe and secure atmosphere for its students, Go Driving School needs to gather certain information from individuals seeking employment. Information will be used only for this purpose and kept confidential.

Name (last, first, MI) _____

Mailing address _____

Home phone # _____ Cell phone # _____ E-mail _____

Social Security number _____

Previous Address _____

I am a US citizen or legally authorized to work in the United States Yes _____ No _____

KSA 8-276 requires driving instructors to hold a valid Kansas drivers' license.

Driver's license # _____ State _____

Driver instructor license # _____ Is this license current? _____

Please provide:

- **A current DMV Driving Record (dated within three months of issuance of license), available from any State office, or from Driver Control record division office in Topeka, 785-296-3671.**
- **Transcripts showing driver's education endorsement or a copy of teaching license if this endorsement is on it.**
- **Upon hire, as required by Kansas State Regulation 91-7-8 (b) (3), a physical examination and health report on Form No 0-416-100 (09/03)**

I prefer working as Classroom instructor _____ Behind the wheel instructor _____ Both _____

Additional information: _____

Previous experience as driving instructor:

1. School, city and state _____

Years served _____ Classroom instructor _____ Behind the wheel instructor _____

2. School, city and state _____

Years served _____ Classroom instructor _____ Behind the wheel instructor _____

3. School, city and state _____

Years served _____ Classroom instructor _____ Behind the wheel instructor _____

REFERENCES

Name: _____ Phone: _____ e-mail: _____

Address: _____

Name: _____ Phone: _____ e-mail: _____

Address: _____

Information required by Kansas State Regulation 91-7-6 (e): Have you been convicted of:

A felony? _____ Driving while intoxicated? _____ Negligent homicide? _____

Has a civil or a criminal complaint ever been filed against you that alleged sexual misconduct or child abuse by your or your participation in or facilitation of such activities (including internal complaints or allegations reported to management or supervisors at places of employment)?

Yes _____ No _____ If yes, please explain: _____

Have you ever chosen not to renew or continue any employment or volunteer service, had your employment or volunteer service terminated, or been subject to any disciplinary action for reasons relating to allegations of sexual misconduct or child abuse by you?

Yes _____ No _____ If yes, please explain: _____

IMPORTANT: For your application to be considered, you must sign below to indicate that you have read and understood the following:

AUTHORIZATION

I hereby authorize Go Driving School, LLC to investigate all statements made in this application, review my driving and criminal records, and to contact my previous employers. I understand that any false statements made herein may eliminate my application from employment consideration, or if discovered after hire, may result in my discharge from employment.

If hired, I will conform to the policies, rules and regulations of Go Driving School, LLC. And, I agree as *required by Kansas State Regulation 91-7-8 (b) (3)* to submit a physical examination and health report on Form No 0-416-100 (09/03).

Signature of Applicant _____ Date _____

ACKNOWLEDGEMENT OF AT WILL EMPLOYMENT

I understand and acknowledge any employment relationship with Go Driving School, LLC is considered ðemployment at will,ö which means the employee may resign at any time and the employer may discharge the employee at any time, with or without cause.

Signature of Applicant _____ Date _____