



## Request for in-service information from previous employing district

If you receive this form it is because a transportation employee at another Oklahoma school district has named you as a previous employer. This form is to enable the transmission of in-service documentation from one district to another. This is important because,

Oklahoma Administrative Code 210:30-5-1 states “(i) Every five years, each driver shall have successfully completed 4 hours per year of in-service training approved by the State Department of Education.” In order to comply with this rule **the school district listed below is requesting any and all in-service records you have for the applicant named below from the previous 5 years.** This information may be mailed or faxed to the district currently employing the applicant.

**TO:**

\_\_\_\_\_  
SCHOOL DISTRICT  
(previous employer)

\_\_\_\_\_  
NAME Title

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
PHONE # FAX

**FROM:**

\_\_\_\_\_  
SCHOOL DISTRICT  
(requesting district)

\_\_\_\_\_  
NAME Title

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
# PHONE # FAX #

(Mr., Mrs., Ms.) \_\_\_\_\_ DL# \_\_\_\_\_ has made an application to our district for a school bus driver position. We are requesting a copy of their in-service records for the previous 5 years or from the beginning date of their employment with you.

**What were the dates of the applicant’s employment with you?** \_\_\_\_\_

### RELEASE AUTHORIZATION

With my signature below, I am authorizing you to release information in regards to school bus training in-service I was a party to while in your employ, acting as your agent, under contract with you, or acting as your representative in any capacity during the preceding five years from the date listed below. This request is specific and to be released only to the district whose name appears below. Authorization of this release will expire once the requested information has been sent to the company named below. This authorization may not be used to provide information to any other persons.

**Name of District** \_\_\_\_\_

**Date** \_\_\_\_\_

**Name of Applicant** \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_

**Witness Signature** \_\_\_\_\_