

Application for Driving Position

All sections of this form must be completed by the applicant.



1. Name (<i>Block Letters</i>):	_____		
2. Address:	_____		
3. Date of Birth:	_____	4. Home Telephone No.:	_____
5. Mobile Phone No.:	_____	6. Email Address:	_____

7. Education Standard Attained: _____

8. Give reference and date of any previous application made to any of the CIE Companies

9. Give particulars of previous employment (if any) with the CIE Companies (if applicable)

From:	To:	Grade:	Depot:
From:	To:	Grade:	Depot:

Reason for leaving employment: _____

10. Give particulars of past and present employment

Firm:	Address:
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Employed as:	From:	To:
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Reason for leaving: _____

Firm:	Address:
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Employed as:	From:	To:
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Reason for leaving: _____

Firm:	Address:
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Employed as:	From:	To:
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Reason for leaving: _____

11. Give names and addresses of two people not related to you and to whom reference as to character may be made

Name:	Address:
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Name:	Address:
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12. Have you ever met with an accident, or received compensation under employers liability, or suffered from an industrial disease?
If yes, give particulars

13. Have you ever had any serious illness or operation?
If yes, give particulars

14. Have you ever been convicted of an offence?
If yes, give particulars

15. Have you ever been involved in a traffic accident(s) for which you were held responsible?
If yes, give brief outline of accident(s)

16. Do you hold a current Driving Licence?
If yes, state category(ies) of licence.
(Please attach copy)

17. Have you ever been disqualified by a Court from holding a Driving Licence or a Provisional Driving Licence?
If yes, state

- (a) Reason
- (b) Period of disqualification
- (c) Date of disqualification
- (d) Court

18. Has a Court ever made an order requiring the endorsement of your Driving Licence or a Provisional Driving Licence?
If yes, state

- (a) Reason
- (b) Period of endorsement
- (c) Date of endorsement
- (d) Court

19. Have you ever been refused motor insurance cover? If yes, give outline of the circumstances.

20. Have you ever lost your motor insurance no claims bonus? If yes, give outline of the circumstances.

Additional information as to education, trade qualifications or experience.

I, THE UNDERSIGNED, DECLARE THE WHOLE OF THE STATEMENTS MADE ABOVE TO BE TRUE AND ACCURATE.

Signed: _____ Date: _____

Any false statement will debar the applicant from employment, or if already employed, will render him/her liable to dismissal.

Bus Éireann is an Equal Opportunities Employer.

Human Resources Department – May 2017