

**NEW JERSEY STATE DEPARTMENT OF EDUCATION  
 CRIMINAL HISTORY REVIEW UNIT  
 TRANSMITTAL FORM  
 SCHOOL BUS DRIVER**

(Type of print in ink)

Check if employee is a  
 School Bus Driver Transfer

**INSTRUCTIONS**

1. Enter name and address of submitting district/private school, include identifying code number for county, district/private school and contractor if applicable.
2. If transmittal is for contractor employees, enter name and address of company. DO NOT INCLUDE CONTRACTOR EMPLOYEES ON SAME TRANSMITTAL USED FOR DISTRICT/PRIVATE SCHOOL EMPLOYEES, CONTRACTOR EMPLOYEES MUST BE SUBMITTED ON A SEPARATE TRANSMITTAL FORM.
3. Enter name, title, and signature of county, district or school administrator submitting transmittal.
4. Enter date of submission.
5. Complete Employee Roster by listing each employees alphabetically.
6. Forward the applicant's notarized Applicant Authorized and Certification form, and payment, to the address below.
7. Three digit school code for private agencies only.

**TRANSMITTAL - SCHOOL BUS DRIVER**

**TO:** CRIMINAL HISTORY REVIEW UNIT  
 NEW JERSEY STATE DEPARTMENT OF EDUCATION  
 PO BOX 500  
 TRENTON, NEW JERSEY 08625-0500

**FROM:** \_\_\_\_\_ |\_\_\_\_\_| \_\_\_\_\_ |\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| \_\_\_\_\_ |\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|  
 COUNTY NAME                      CODE                      DISTRICT/PRIVATE SCHOOL NAME                      CODE                      SCHOOL CODE                      CONTRACTOR NAME, IF APPLICABLE                      CODE

\_\_\_\_\_ STREET ADDRESS                      CITY                      STATE                      ZIP CODE

Submitted herewith is the name and social security number of each district/private school or contractor employed school bus driver hired in accordance with the provisions of *N.J.S.A. 18A:6-7.1, et seq., and 18A:39-17 et seq.*, in order to fulfill the district's obligation to provide a thorough and efficient operation.

\_\_\_\_\_ NAME (PRINT OR TYPE)                      TITLE                      TELEPHONE #

\_\_\_\_\_ SIGNATURE                      DATE