

SCHOOL BUS DRIVER CERTIFICATION ROSTER TO COUNTY SUPERINTENDENT

| County Name | _ _ | _ _ | District/Private School Name | _ _ _ _ _ _ _ | _ _ _ _ | _ _ _ _ | Contractor Name |
|-------------|------------|-----|------------------------------|------------------------|------------|---------------------------|-----------------|
| LAST NAME | FIRST NAME | MI | SS# | DRIVERS LICENSE NUMBER | EXPIRATION | CRIMINAL HISTORY APPROVAL | |
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