Transportation Department Turtleford Office

Box 280

Turtleford, SK S0M 2Y0 Phone: 306-845-2150

Transportation.department@nwsd.ca



SPARE BUS DRIVER ANNUAL REPORT

Name as it appears on driver's license:						
Address:		Land Location:				
Town:		rovince:	Postal Code:			
Home Phone:		Cell Phone:				
Please select preferred contact number.		O Home Phone	Cell Phor	ne		
Have you ever been convicted of a criminal	off	ence for which a pardon has	not been gra	nted	? OYes	ONo
Copy of current license has been sent to th	e Tr	ansportation Office via emai	l or text.		Oyes	ONo
Driver License Customer Number:		Issu	ing Province:			
License Expiration Date:						
School Bus Endorsement Expiration Date: _						
**Alberta residents must submit a copy of						
Please select all areas you are willing to dri						
Lloydminster Area	Meadow Lake Area		Turtleford Area			
⊙ Hillmond	0	Goodsoil		0	Edam	
o Lashburn	0	Loon Lake		0	Glaslyn	
 City of Lloydminster 	0	City of Meadow Lake		0	Paradise F	till
 Maidstone 	0	Pierceland		0	St. Walbu	rg
o Marshall	0	Rapid View		0	Turtleford	
Neilburg						
Are you willing to drive for Special Events?		Oyes	ONo			
X		Date:				
Signature of Applicant						
FFICE USE ONLY						
Supervisor of Transportation						
Supervisor of Transportation						