

# ... to join a top London bus company as a bus driver!

#### The red London bus is one of our city's icons.

London's bus network is one of the most comprehensive networks of any major world city. As one of the largest operators in London we are consistently at the top of the performance league tables and are continually rated amongst the best.

In order to maintain our performance at the top of Transport for London's league tables we employ a workforce of over 4,500 staff working from 14 locations running 1.500 buses.

It's an extremely diverse workforce representing the multicultural society that we live and work in. However, we are keen to encourage more women to become bus drivers as they are one group who we feel are under represented.

To ensure that we maintain our excellent performance, we are looking to recruit additional drivers in our operational

> area. Whilst it is not physically difficult to drive a bus, we do require certain attributes to be a successful bus driver.

You must be numerate and literate as well as tactful and confident in your approach to the travelling public. As buses run seven days per week you must be prepared to work shifts.

As a first step towards a career on the buses you must hold a full UK car driving licence for a minimum of TWO YEARS.

and benefits package in an industry that is growing every day; which means that you can have the added benefits of a job that offers both security and satisfaction.





# MAKING AN APPLICATION TO GO-AHEAD LONDON This form is for bus driver vacancies only

When submitting the downloaded application form to us you must ensure that you have ALL six pages that comprise the application form. There are four pages for the application form itself and two pages relating to our drugs screening policy and a medical questionnaire.

Once you have printed the application form you must ensure that you have answered ALL the questions as fully as possible. If you do not complete the form properly your application may be rejected. Before sending your application to us you must meet our minimum criteria which is:

- You must have held a valid United Kingdom driving licence for a MINIMUM of TWO years
- You must have no more than SIX penalty points on your licence
- If you have been convicted of a drink/drive offence, you must wait a MINIMUM of five years after the expiry date of the driving ban.
- We will not accept an application if you have more than one drink/drive conviction
- Please provide full postal addresses for ALL your previous and current employers. If you do not your application will be delayed and maybe rejected
- Please write clearly any addresses, phone numbers and/or e-mail addresses
- Please provide details of your work history for the past 5 years
- If you hold a PCV category D licence please ensure you provide details of where and with whom you passed your PCV driver training with details of any PCV driving experience (even it is more than 5 years ago)
- Please enclose a copy of your driving licence

Once you have fully completed your application please post it to the following address:

Go-Ahead London Recruitment & Training Centre 1 Warner Road Camberwell London SE5 9LU

Don't forget to put a stamp on the envelope!

			OFFICE USE
Ahead-London	APPLICATI	ON FOR	Aptitude Test
Go Aneda-London	EMPLOY		Drive
			Drugs Test
Dia and mai			Medical
	nt CLEARLY and complete in ick boxes where appropriate		Interview
Post	Preferred	, 	Document Check
Applied for:	Location?		Interview Date/Time:
A. PERSONAL D	ETAILS		Approved for:
Surname/ Family Name			Location:
Forenames/			
Given Names			Grade:
Former/Maiden Name (If appropriate)		Mr/Mrs/Miss/Ms	Approved By:
Your address:			Start date:
			Ref Decision:
			Comments:
Area/Town			
County	Postcode		
🕾 Home:	Mobile:		
E-mail address:			
If you would like us to send corres	pondence relating to your application by e-mai	I please tick this box	
National Insurance No:	Age: E	Date of Birth: / /	
В			
Have you previously worke	d for a Go-Ahead Group company	/? NO	YES
If YES please give details	pelow:		
Where were you employed (name of	of Company)?	From /	/ то / /
Why did you leave?			
Have you previously applie	ed to us for employment?		
	If YES when did you apply?	/ /	
C. HOW DID YOU HEA	R ABOUT THE JOB?		
Newspaper		riend 🖂 Bacl	k of Bus
Poster		Other (please specify)	
		(piease specify)	

<b>D. EMPLOYMENT HISTORY</b> Please provide details of your employment during the past <b>5</b> years. Please
provide FULL postal addresses or a contact number for all the employers that you list below. Include details of ANY periods
of unemployment/studying (including address of where you were claiming benefits or studying). Please use Section H or a
separate sheet of paper for any additional information that will support your application. Start with your present employer and
work back. Any gaps/unaccounted periods in your work history can result in your application being rejected.

Name & Address of Employer	Dates	What did you do?	Why did you leave?
Present/Most recent Employer:	From		
	/ /		
	То		
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	From		
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Do you have any objection to your present or present or present or present of YES		5.11	
Do you require a visa/work permit to take employ	ment in the Unit	ed Kingdom? NO	
If <b>YES</b> what type of visa/work permit do you han number of hours you are permitted to work (for e	ave and are you	restricted by the type	of employment you can take or the
We welcome applications from those with disabil impact upon the job you have applied for:	ities. Please indi	cate here whether you	have a particular disability that might

. YOUR DRIVING L	ICENCE DETAILS						
UK Driving Licence Num	per						
How long have you held	a full UK car driving licence?			Years		Months	
Have you exchanged a	Foreign licence for a UK licence?	NO	YES		If YES when?	/	/
Have you ever held an L LGV (Cat C) NO PCV (Cat D) NO	GV or PCV licence? YES Expiry date of LGV YES Expiry date of PCV						
	V (category D) licence please stat ehicle driven and with what compa						Please
	ny periodic training (Driver CPC) If			Г	e you been acc	redited? _	
	BTEC bus driver qualification? nts or driving convictions on your l	NO L		≡s ∟			
CONVICTIONS Have you ever been convic NO YES If Y	and <b>both</b> sides of the photocard. eted for a criminal offence (which is <b>ES</b> please provide details of the o ences please provide details in the	s not sper	nt under d senter	the Reh	nabilitation of O ne space below	ffenders	Act 197
Date	Offence				Court Order/Per		
	opportunities throughout our orga feel best describes your ethnic ori			will not			
White Other	S Black Caribbea	an		υ	Black Other		
ou do not feel that the abov	re groups apply to you, please tick	this box	and spe	cify how	you would cla	ssify your	self:

# **H.** ADDITIONAL INFORMATION

Please use this space (or additional paper if necessary) to provide any additional information that you feel may be relevant to the post you are applying for:

### J. DECLARATION

All employment is subject to satisfactory references, medical examination (including a drugs test) and a period of probation.

I confirm that the information in this application form is correct to the best of my knowledge. I hereby give my explicit consent to Go-Ahead London (which includes London Central Bus Co Ltd, London General Transport Services Ltd, Docklands Buses Ltd & Blue Triangle Ltd) to process any personal data concerning me on this application form, including any sensitive personal data for the purposes of recruitment, employment and general business purposes, including placing and processing any such data on a computer system.

I understand that any false information or deliberate omissions will disqualify me from employment or that my employment may be terminated if the information provided is subsequently found to be incorrect.

Signed: \_

Date: \_\_\_\_

Please ensure that you have completed **ALL** sections of this application form otherwise your application may be delayed or rejected. Once you have completed your application form, return it along with the completed medical questionnaire in the envelope provided (you **MUST** attach a stamp) and a photocopy of your driving licence (if applying for a driving position) to:

Go-Ahead London Recruitment & Training Centre One Warner Road Camberwell London SE5 9LU



Creating Opportunities

# **MEDICAL INFORMATION**

# Please complete in **BLOCK LETTERS** and tick boxes where appropriate

Name:				Age:		
Height:	Ft.	In.	Weight: St		Ibs.	

## Have you ever in your life - including childhood had any of the following?

Any Heart Condition	Yes	No
Loss of sight or cataract removal	Yes	No
Double or tunnel vision	Yes	No
Sleep apnoea, narcolepsy or cataplexy	Yes	No
Any epileptic attack or loss of consciousness	Yes	No
Drink problem	Yes	No
Drug addiction	Yes	No

### Are you being treated for any of the following?

Angina	Yes	No
Medical or nervous disorders	Yes	No
Diabetes with insulin injections	Yes	No

Have you stayed away from work or school in the past year?		No	
Have you consulted a doctor in the past year	Yes	No	
Have you any permanent disability	Yes	No	

If you have answered **Yes** in any of the boxes or if you have any other medical conditions which may affect you ability to work, please give particulars.

The information give by me in this form is correct in every detail and I understand that giving false information could result in my rejection for employment.

\_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_



#### **Drug Screening Procedure**

#### **Guidance Notes for Applicants**

Go-Ahead London (referred to in this document as "The Company") operates a Drug Screening programme to monitor for the use of and the effects of drugs in the workplace and on premises occupied by the Company.

All individuals, without exception, seeking first time employment in, or transfer into, the job of bus driver, conductor and engineering wages grades are required to provide a urine sample for analysis to detect whether certain drugs have been used. Strict confidentiality is maintained at all times. The collection and analysis of specimens is carried out by Coombe Medical Services Ltd.

The Company will not continue with the recruitment procedure where any individual refuses to agree to provide a urine sample.

If the test proves positive for drugs listed below it is his/her responsibility to show, through medical evidence supplied in writing by a qualified and practising medical practitioner, that she/he has taken the drug for sound medical reasons acceptable to the Company and acceptable under current DVLA guidelines for Class 2 driving licence applications.

The Drug Abuse Policy of The Company prohibits, at all times, the possession of and the use of illegal drugs in all workplaces and premises occupied by the Company and failure to comply with this policy will render an employee liable to summary dismissal.

The drugs in question are:

Cannabis, OpiatesMorphine (including narcotics and heroin), Cocaine, Amphetamine (including Methamphetamine and Khat), Barbiturates, Benzodiazepines, Methadone, Tricyclic antidepressants, MDMA (Ecstacy).

In the event that the test shows negative, there is no further action. In the event that the test shows positive, the recruitment procedure is suspended. In normal circumstances, the Company will not proceed further with the recruitment procedure. You will be advised of the outcome shortly after you have provided the sample.

Where there is a positive result, the individual has the right to request further confirmatory testing. The full cost of the re-testing process must be paid by the individual concerned. This test must be undertaken within 24 hours of the initial test. The result of this test is usually available within one week. With this second test, a portion of each urine sample is retained untested in secure conditions of strict confidentiality for a period of one year. In the event of a dispute, the untested sample will only be made available under the chain of custody to a bona fide and recognised pathology testing service of the individual's choosing, except where it will be required as evidence in legal proceedings. The full cost of all re-testing processes must be paid by the individual concerned.

I have received a copy of this document.

Signed\_\_\_\_\_ Date\_\_\_\_\_

Print Name

LG Drug Screening Guidance Notes for Applicants