



Hocking County Veterans' Service Commission

Proudly Serving Those Who Served

HOCKING COUNTY VETERANS' SERVICE COMMISSION

BACKUP VAN DRIVER

*Applications MUST be returned to our office on or before October 31, 2025.
Hiring will be done in accordance to Title 5901.07 of the Ohio Revised Code.*

*Applicants must attach copy of their driver's license and DD-214 for consideration.

Duties include but are not limited to: safely pickup, drop-off, and wait for Veterans at their VA based medical appointments as required by 5901.03 of the Ohio Revised Code. Use of our van will be required, knowledge of Chillicothe VAMC, Chalmers P. Wylie, and Lancaster CBOC and surrounding areas helpful, must be able to use county gas pump to fill up van for next day's use, will be required to submit to a drug screening and undergo a background check and able to demonstrate safe driving record, maintain van cleanliness, notify office staff of service due or issues with van, adhere to schedule set forth by office staff, notify office staff of scheduling conflicts or inability to meet arrival times, be available for Logan parades (Veterans & Christmas), and ability to use wheelchair ramp for van and safely strap wheelchair bound Veterans in place, must be able to safeguard Veterans information and signature sheets, and ability to perform additional duties as assigned

- This position is for a part-time driver ONLY.
 - No hours/pay will be guaranteed.
- Pay rates will be discussed during the interview process

Application for employment with the Hocking County Veterans' Service Commission
VSC Van Driver

Name: _____

Address: _____

Home telephone: _____ Work Telephone: _____

High School Grad? Yes ____ No ____ Year ____ Social Security No. _____

Have you had any moving traffic violations in the past five (5) years? Yes ____ No ____

If yes give type of violation and date: _____

Are you a veteran? Yes ____ No ____ Please include DD-214, if applicable.

If yes please give dates of service, branch, and type of discharge: _____

If you answered no to the previous question, are you the spouse, surviving spouse, parent, or child of a veteran? Yes ____ No ____ Relationship: _____ Please include DD214.

Have you ever had any felony charges? Yes ____ No ____ If yes, please give date and type of charges:

REFERENCES:

Name:	Address:	Telephone Number:	Relationship:
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Does the VSC Board have permission to contact your references and former employers?

Yes ____ No ____.

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT:

Name & Address:	Dates of Employment:	Type of work Performed:	Reason for leaving:	Name of Supervisor:
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Please comment on why you feel that you are qualified for the position with the Hocking County Veterans Service Commission:

Are there any current barriers which may affect your job performance or your availability?

Date: _____

Signature: _____

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VSC OFFICE USE ONLY:

Date Interviewed: _____

Interviewed By: _____

Hired? Yes ____ No ____

Date Hired: _____

Hourly Rate of pay: \$ _____

Approved By: _____