

## Van Driver Job Description

**Report to:** Transportation Program Manager (TPM)

**Salary Classification:** Non-Exempt

**Starting Salary:** \$12.00 per hour

**Benefits:** Vacation Pay, Sick Leave, Holiday Pay

**Position Summary:** Communicates throughout the day with office staff to ensure all clients are picked up in a timely manner and delivered to the appropriate locations safely.

### **Responsibilities:**

- Pick up and safely deliver citizens of Wells County in need of transportation.
- Assist **ALL** passengers on and off the van as well as load and unload their packages from the van.
- Keep accurate records of each day's activities on driver's log, iPads, inspection forms, Vehicle Maintenance Reports
- Obtain Medicaid signatures & record odometer readings on the iPad.
- Maintain constant communication with the dispatcher, requesting and receiving permission regarding schedule add-ons, deviations, etc.
- Collect, record and total fares and co-payments for designated trips.
- Driver is responsible for money box, Motorola two-way radio and Apple iPad.
- Complete daily Pre-Trip and Post-Trip checklists on vehicles and report any needed repairs to the Transportation Program Manager utilizing the Vehicle Maintenance Report (VMR).
- Maintain accurate maintenance records to ensure that all vehicle minor maintenance, such as oil changes, tire rotations, and needed repairs are done on time.
- Ensure that all vehicles have their necessary supplies on board.
- Wash / Sanitize inside and outside (door handles, railings, grab bars, etc.) of the van(s), **DAILY**.
- Keep the inside of the van free of debris and windows (inside and out) clean.
- Perform **WEEKLY** vehicle cleaning and inspection, including Sanitization Protocols.
- Clean up after a client who has become ill on the van using the toxic waste kit for proper disposal.
- Attend training sessions and successfully complete annual Drivers Safety Courses, CPR, First Aid instruction and all other training sessions scheduled by the agency.
- Complete Fit for Duty physicals as required.
- Driver is responsible for all speeding tickets or any other citations that he/she may incur while working for the WCCOA. Tickets or citations on or off the job may require reprimand by the Agency up to and including dismissal.
- Receive and complete additional assignments from the office.
- Comply with all company policies, procedures and safety regulations at all times including our wheelchair safety policy.

**Qualifications:** The following statements represent the minimum experience and training standards that will be used to screen applicants, provided that equivalent substitutions will be permitted in case of deficiencies in either experience or education.

- Must be 21 years or older.
- High school diploma or GED equivalency.

**Qualifications continued:**

- Must pass an Indiana State Police check of criminal activity and be free of any crimes pertaining to criminal deviate conduct, rape, neglect or exploitation of an endangered adult, failure to report battery, theft, and criminal conversion.
- Must not be on National Registry of Sex Offenders.
- Possess and maintain excellent driving record, BMV Driver Record will be reviewed.
- A pre-employment drug test will be administered, must come back “Negative.”
- Must pass INDOT required physical – “Fit for Duty” evaluation.
- Must receive “Employment Authorized” when E-Verify is performed.
- Proof of insurance for personal vehicle will qualify driver to be insured by our insurance carrier.
- Possess and maintain “For Hire” Endorsement driver license.
- Be and remain drug free - ongoing random drug, alcohol, or both drug and alcohol testing is required in compliance with DOT regulations.
- Effective communication skills both written and verbal.
- Problem solving skills.
- Candidate should be a self-starter, compassionate, patient, and enjoy working with the elderly, the disabled, and others needing assistance.
- Organization and prioritization skills are a must for this position.
- Must be reliable.
- Ability to handle confidential information.
- Willingness to work with a flexible schedule determined by a demand response transportation service.

**Employer:** It is the policy of Wells County Council on Aging to provide equal employment opportunity (EEO) to all persons regardless of age, color, national origin, citizenship status, physical or mental disability, race, religion, creed, gender, sex, sexual orientation, gender identity and/or expression, genetic information, marital status, status regarding public assistance, veteran status, or any other characteristic protected by federal, state, or local law. In addition, Wells County Council on Aging will provide reasonable accommodations for qualified individuals with disabilities.

*CONFIDENTIAL*  
**SAFETY-SENSITIVE EMPLOYEE APPLICATION SUPPLEMENT**

Previous US Department of Transportation Drug and Alcohol Testing

\_\_\_\_\_  
Applicant Name (First, Middle Initial, Last)

\_\_\_\_\_  
Social Security Number

Have you ever participated in USDOT-regulated drug and alcohol testing with previous employers?

**Yes**\_\_\_\_\_ (if yes, complete #1 and #2)

**No**\_\_\_\_\_ (if no, skip to #2)

1. In the last **two years**, have you ever:

a) Tested positive (0.04 or greater) for alcohol?

Yes\_\_\_\_\_

No\_\_\_\_\_

b) Had a verified positive drug test result?

Yes\_\_\_\_\_

No\_\_\_\_\_

c) Refused a required drug or alcohol test (or had a verified adulterated or substituted drug test result)?

Yes\_\_\_\_\_

No\_\_\_\_\_

d) Violated any other DOT drug or alcohol testing regulation within the last two years?

Yes\_\_\_\_\_

No\_\_\_\_\_

2. Have you tested positive, or refused to test, on any pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules in the last two years?

Yes\_\_\_\_\_

No\_\_\_\_\_

If you responded "YES" to any of the above questions, please provide documentation or your successful completion of DOT Return-to-Duty requirements. If you do not have this information, please explain why:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use additional pages as necessary)

*"I certify that the facts contained in this form are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this form shall be grounds for dismissal."*

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date