

North Carolina Division of Motor Vehicles
School Bus and Traffic Safety Section

APPLICATION FOR LICENSE

Commercial Driver Training Instructor

FOR DEPARTMENT USE ONLY

Audit No.
License: 1 2 3 4 5
Issued License No _____
Date Issued _____
Date Expires _____
Remarks:

This form must be submitted by ALL applicants for a Commercial Driver Training School Instructor's License

| | | | | | | | | | | | |
|------------------------|--|----------------|-------|--|---------------|-------------------------|--|-------|---------------------|--|--|
| Name of Applicant Last | | | First | | | Middle | | | Date of Application | | |
| | | | | | | | | | Mo. Day Yr. | | |
| Home Address | | | | | | City | | | State | | |
| | | | | | | | | | Zip Code | | |
| Home Phone (Area Code) | | | | | | N.C. Driver License No. | | | Email Address | | |
| | | | | | | | | | | | |
| Business Phone | | Place of Birth | | | City | | | State | | | |
| | | | | | | | | | | | |
| Height | | Color of Eyes | | | Color of Hair | | | Sex | Date of Birth | | |
| | | | | | | | | | Mo. Day Yr. | | |

EDUCATION AND MILITARY SERVICE

| | | | | | | | | | |
|--|--|--|--|------------------------------------|--|-----------------------------------|--|-----------------|--|
| Education (<i>circle highest grade completed</i>) | | Grade School | | High School | | College | | Other (Explain) | |
| | | 1 2 3 4 5 6 7 8 | | 9 10 11 12 | | 1 2 3 4 5 6 | | | |
| Have you successfully completed a course in Driver, Education at an accredited college or university? (<i>If Answer is yes complete the following spaces.</i>) | | College or University | | | | Location of College or University | | | |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | | | City NC | | | |
| Do you hold a N.C. Teaching Certificate? | | Yes <input type="checkbox"/> No <input type="checkbox"/> | | If so, indicate certificate number | | | | | |
| Are you a veteran | | Dates of Service | | Branch of Service | | Type of Discharge | | | |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | | From: To: | | | | | | | |

List name and address of Commercial Driver Training School at which you are (*or expect to be*) employed:

Name of School

EMPLOYMENT

List employment experience for last 5 years, most recent first (use additional paper if extra space is needed)

| | | | | | |
|--------------|--|-----------------|--|--------------------|--|
| Name of Firm | | Address of Firm | | | |
| Kind of Work | | Date Employed | | Reason for Leaving | |
| | | From To | | | |
| Name of Firm | | Address of Firm | | | |
| Kind of Work | | Date Employed | | Reason for Leaving | |
| | | From To | | | |
| Name of Firm | | Address of Firm | | | |
| Kind of Work | | Date Employed | | Reason for Leaving | |
| | | From To | | | |

QUESTIONS

You must answer each of the following questions "Yes" or "No." All questions answered "Yes" must be explained in the explanation area provided on Back side of application.

| | | |
|---|-----|----|
| 1. Have you ever been known by any name other than the one shown on the personal history? | Yes | No |
| 2. Have you ever been convicted of a felony? | Yes | No |

(Questions continued on back)

| | | |
|---|-----|----|
| 3. Have you ever been convicted of murder without malice with a motor vehicle? | Yes | No |
| 4. Have you ever been convicted of negligent homicide? | Yes | No |
| 5. Have you ever been convicted of driving under the influence of intoxicating liquors? | Yes | No |
| 6. Have you ever been convicted of driving under the influence of drugs? | Yes | No |
| 7. Have you ever been convicted of leaving the scene of a traffic accident involving death or person injury? | Yes | No |
| 8. Have you ever been convicted of perjury or making of any false statements relating to any portion of the N. C. Motor Vehicle Law? | Yes | No |
| 9. Have you ever been convicted of any traffic violations other than parking violations? | Yes | No |
| 10. Have you ever been convicted of any crime involving moral turpitude? | Yes | No |
| 11. Have you ever been convicted of any misdemeanor other than traffic violations? | Yes | No |
| 12. Are you now involved with any charges or court proceedings relating to the matters stated in questions 2, 3, 4, 5, 6, 7, 8, 9, 10, or 11? | Yes | No |
| 13. Has your license to drive in N. C. or any other state, ever been refused, cancelled, suspended, or revoked? | Yes | No |
| 14. Has your commercial driver training school instructor's license ever been denied, cancelled, suspended, or revoked? | Yes | No |
| 15. Are there any motor vehicle accident judgments pending against you as yet unsatisfied? | Yes | No |
| 16. Have you given driver training instruction for compensation or hire within the past 12 months? | Yes | No |

Explanation of the previous questions answered "Yes" (Use additional plain paper if extra space needed)

INSTRUCTOR TRAINER LICENSE APPLICATION

To be filled out by those applying for certification as trainers of instructors. See Rules and Regulations. Section .0501 (c).

EXPERIENCE: I certify that I have worked as an active, licensed instructor in driver education for the following schools.

| SCHOOL | CITY & STATE | DATES WORKED |
|--------|--------------|--------------|
| | | |
| | | |

OBSERVATION: Classwork Observation Conducted (2 hrs.) _____ DATE/S

Roadwork Observation Conducted (2 hrs.) _____ DATE/S

RECOMMENDATIONS: _____ DRIVER EDUCATION SPECIALIST

Attached is a check or money order in the amount of \$16.00 to cover processing fees for this certification.

The undersigned swears (affirms) that he has read the entire foregoing personal history schedule; that he knows the contents thereof; And that all answers, statements and all other matters contained therein are true in substance and in fact.

Applicant's signature _____

TO KNOWINGLY MAKE A FALSE STATEMENT OR CONCEAL A MATERIAL FACT IN THE APPLICATION IS A CRIMINAL OFFENSE, AND MAY RESULT IN THE REVOCATION OF YOU COMMERCIAL DRIVER TRAINING SCHOOL LICENSE.