

**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				Date of Application			
				Mo.	Day	Yr.	
Home Address			City	State		Zip Code	
Home Phone (Area Code)			Current N.C. Driver License No.			Social Security Number	
Business Phone (Area Code)			Place of Birth				
			City & State				
Height	Weight		Color of Eyes		Color of Hair		Sex
							Mo. Day Yr.

EDUCATION AND MILITARY SERVICE

Education (Circle the highest grade completed)																		
Grade School								High School				College						Other(Please specify)
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?									College or University						Location of College or University			
Yes No (If answer is yes complete the following spaces.)									Date Course Completed						City	State		
Do you hold a N.C. Teaching Certificate? Yes No									If so, indicate certificate number									
Are you a veteran?			Dates of Service From/To				Branch of Service				Type of Discharge							
Yes No																		

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	
		Firm	
Kind of Work	Dates Employed Dates of Employment From/To	Reason for Leaving	
Name of Firm		Address of Firm	
Kind of Work	Dates Employed From/To	Reason for Leaving	
Name of Firm		Address of Firm	
Kind of Work	Dates Employed From/To	Reason for Leaving	

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 the back side of application.

1.	Yes No	Have you ever been known by any name other than the one shown on the personal history?
2.	Yes No	Have you ever been convicted of a felony?
3.	Yes No	Have you ever been convicted of murder without malice with a motor vehicle?
4.	Yes No	Have you ever been convicted of negligent homicide?
5.	Yes No	Have you ever been convicted of driving under the influence of intoxicating liquors?
6.	Yes No	Have you ever been convicted of driving under the influence of drugs?
7.	Yes No	Have you ever been convicted of leaving the scene of a traffic accident involving death or personal injury?
8.	Yes No	Have you ever been convicted of perjury or making of any false statements relating to any portion of the N.C. Motor Vehicle Law?

9.	Yes	No	Have you ever been convicted of any traffic violations other than parking violations?
10.	Yes	No	Have you ever convicted of any crime involving moral turpitude?
11.	Yes	No	Have you ever been convicted of any misdemeanor other than traffic violations?
12.	Yes	No	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?
13.	Yes	No	Has your license to drive in N. C. or any other state, ever been refused, cancelled, suspended, or revoked?
14.	Yes	No	Has your commercial driver training school instructor's license ever been denied, cancelled, suspended, or revoked?
15.	Yes	No	Are there any motor vehicle accident judgments pending against you as yet unsatisfied?
16.	Yes	No	Have you given driver training instruction for compensation or hire within the past 12 months?

Explanation of the previous questions answered "Yes"

INSTRUCTOR ~~TRAINER~~ LICENSE APPLICATION

To be filled out only 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

RECOMMENDATION:
DRIVER EDUCATION SPECIALIST

Attached is a check in the amount of \$8.00 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 YOUR COMMERCIAL DRIVER TRAINING SCHOOL LICENSE.