State of Utah
DEPARTMENT OF PUBLIC SAFETY
DRIVER LICENSE DIVISION

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Date Received:
Approved By:
Issued License No:
Date Issued:
Date Expires:
Date Dup Issued:

COMMERCIAL DRIVER TRAINING INSTRUCTOR / OPERATOR CERTIFICATION APPLICATION

☐ Original ☐ Renewal

RETURN COMPLETED APPLICATION TO:
Attention: Ellen Obray or Sharon Harward
Driver License Division
P.O. Box 144501
Salt Lake City, Utah 84114-4501

SECTION 1: PERSONAL HISTORY

Name of Applicant (Last, First, Middle):	Date of Application:

Home Address (Street, City, State, Zip):		

Home Phone:	Social Security Number:	Utah Driver License Number: No: Exp:

Business Phone:	Place of Birth (City, State):

Date of Birth:	Weight:	Height:	Hair Color:	Eye Color:	Sex:

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SECTION 2: EDUCATION

Education (Circle Highest Grade Completed):			
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, university or an approved Instructor Certification Course? (If "Yes" complete the following area.) Yes ☐ No ☐	Name of school, college, or university Instructor Certification Course was completed:	Location: City: State Date:

SECTION 3: OPERATOR INFORMATION

1.   Will you serve as an operator for the driver training school?
   Yes _____ No_____(if no move on to section 4)

Please write the name of the school and branch offices that the operator will oversee.

Location	Address	Phone Number

2.   Does the operator applicant have 6 college semester credit hours or eight college quarter credit hours in business related courses through an accredited college or university? (Transcripts must be attached) **Yes _____ No _____**

3.   Does the operator applicant have two years experience operating a business? (A document must be attached detailing responsibilities) **Yes _____ No _____**

4.   Does the operator applicant have a combination of college credit and business experience? (Attach transcripts and document detailing responsibilities) **Yes _____ No _____**

5.   Has the operator applicant attached a copy of a business plan? **Yes _____ No _____**

SECTION 4: INSTRUCTOR EMPLOYMENT INFORMATION

List the name and address of the commercial driver training school at which you are (or expect to be) employed.

Name of School:	Address (Street, City, State, Zip):

Endorsement:

I certify that I am the owner of _____ and
(School Name)

that _____ is employed by me as an instructor.
(Employees Name)

_____   _____
(Signature)   (Date)

SECTION 5: EMPLOYMENT HISTORY

List employment history for the past 5 years, most recent first:
(Use additional paper if extra space is needed)

Company Name:	Address:	
Responsibilities:	Reason For Leaving:	Employed
		From:
		To:

Company Name:	Address:	
Responsibilities:	Reason For Leaving:	Employed
		From:
		To:

Company Name:	Address:	
Responsibilities:	Reason For Leaving:	Employed
		From:
		To:

SECTION 6: QUESTIONS

All questions must be fully answered: (If you answered Yes to any of the questions, an explanation must be provided in the next section.)

1. Have you ever been known by any other name other than the one shown on the personal history? **Yes** _____ **No** _____

2. Have you ever been convicted of a felony? **Yes** _____ **No** _____

3. Have you ever been convicted of automobile homicide? **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 alcohol? **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 personal injury? **Yes** _____ **No** _____

8. Have you ever been convicted of perjury or making of any false statements relating to any portion of the Utah 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** _____ Circle Question No.

13. Has your license to drive in Utah, or in any other state, ever been refused, disqualified, cancelled, suspended, or revoked? **Yes** _____ **No** _____

14. Has your commercial driver training school instructor's license ever been refused, disqualified, cancelled, suspended, revoked or placed on probation? **Yes** _____ **No** _____

15. Are there any motor vehicle accident judgments pending against you as yet unsatisfied? **Yes** _____ **No** _____

EXPLANATIONS:

_____

_____

_____

_____

_____

_____

_____

_____

Revised 08/12/2013

SECTION 7: AGREEMENT

The Commercial Driver Training Instructor/ Operator named herein, in consideration of their mutual duties and responsibilities set forth herein, agree to the following:

1. Comply with all applicable statutes and regulation of the State of Utah and the Federal Highway Administration.

2. Read, understand, abide by and comply with all the requirements stated in the Certification on Licensed Instructors of Commercial Driver Training Schools (Administrative Rule R708-2).

3. Permit the State to conduct on-site inspections at least annually or more often when deemed necessary by the Division.

4. Any material change affecting the answers or statements in this schedule must be reported immediately to: Utah Department of Public Safety, Driver License Division, PO Box 144501, Salt Lake City, Utah 84114-4501 attn: Driver Education Manager. To knowingly make a false statement or conceal a material fact in this application is a criminal offense and may result in the refusal to issue, denial or revocation of your commercial driver training instructor license.

SECTION 8: CONDITIONS

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

_____
(Applicant Signature)

(This form must be notarized to be accepted)

Subscribed and sworn to me this _____ day of _____ 20_____

_____
(Notary Public)

_____
(Address)