CAREER TRANSITIONS, INC. Commercial Driver's License (CDL) Training Application

Student will complete and return this form to Career Transitions with all required documents and fees: 189 Arden Drive, Belgrade, MT 59714. Contact info: 406-388-6701 x 100 or ct@careertransitions.com. Driving instruction will begin when a learner's permit (CLP) has been issued, student has submitted this form with CLP, driver's license, Medical Examiner Physical card, confirmation of scheduled test date(s), payment or billing information, and has passed a drug test.

<u>Tuition Option and Cost:</u>

Full Legal Name		
Mailing Address		
Physical Address		
City	State Zip Code	
Date of birth	Social Security Number	
E-mail address	Work Phone	
Home Phone	Cell Phone	
Name of High School & Add	lress	
Year of Graduation	or Year of HiSET (GED)	

Postsecondary Education, Credentials and/or Certifications:

- 1. Disability Status (Select One)
 - a. None
 - b. Yes
 - c. Disability Affecting Employment
 - d. Developmental Disability
 - e. Learning Disability
 - f. Prefer Not to Answer
- 2. Ethnicity (Select One) Hispanic Non-Hispanic
- 3. Race (Select all that apply)
 - a. White/Caucasian
 - b. Asian
 - c. Hawaiian or Pacific Island
 - d. Black/African American
 - e. American Indian or Alaskan Native
 - f. Prefer Not to Answer
- 4. Country of Citizenship _____
- 5. Gender: Male____ Female____ Other____

Student Records (filled out by CT staff)

- ____ Applicable Fees: Amount_____ Check _____ Credit Card _____ Other funding source
- ___ Copy of Front and Back of Current Driver's License (CT will copy)
- __ Copy of Learner's Permit (CT will copy)
- ___ Current Medical Examiner's Certificate (CT will copy)
- __ Confirmation of Scheduled Test Date/Time from DMV (CT will copy)

Driving Experience

List Type of Equipment Driven

1	
2	
3.	
4	

Have you had experience driving a vehicle with a manual transmission?

° _{Yes} ° _{No}

How did you find out about Career Transitions' CDL training?

Additional Agreements:

- The CDL student understands and agrees to training in a 1993 International truck. The success of the student is dependent upon a respectful relationship with the CDL instructors. The student should apply the presented information to this end: the safe and professional driving of the CT truck.
- The applicant is responsible for paying for all services. In the event that the CDL student does not pass the driving test, re-test fees will apply and must be paid in advance of the re-test. After consulting the CDL teacher, the student should contact the education coordinator for any additional training required and re-testing. Those services will not be provided until tuition is paid.
- The student will be liable for payment of all costs incurred by Career Transitions in the collection of past due obligations or collections on returned checks including court costs, service of process, and reasonable attorney fees.

- Following the CDL training the student agrees to communicate with a Career Transitions' staff member and to provide employment information. This will include the name of your employer and wages.
- This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge and that I agree to the terms of Career Transitions.

Student Signature

Date

Career Transitions Staff Signature

Date