

**CDL Training Enrollment Agreement**  
**\$2,500 DUE AT TIME OF APPLICATION**

CDL/A  CDL/B  
 DAY  EVENING

DATE OF APP \_\_\_\_\_

COURSE # \_\_\_\_\_

COURSE DATE \_\_\_\_\_

**A. STUDENT INFORMATION**

_____	_____	_____	_____
Last Name	First Name	M.I.	Social Security Number
_____			_____
Street Address (include apt. no.)			Date of Birth
_____	_____	_____	_____
City	State	Zip Code	Email Address
_____			_____
Home Phone Number (include area code)			Alternate or Cell Phone Number
_____			_____
Name of Emergency Contact		Relationship	Phone Number
_____		_____	_____
Driver's License Number		License Expiration Date	
_____		_____	

**US Citizen?**  Yes  No If No, give ethnic origin and type of Visa \_\_\_\_\_

**Gender:**  Male  Female

**Race:**  Black  White  Latin/Hispanic  Native American Indian  Asian

**B. EDUCATION / MILITARY EXPERIENCE**

High School Diploma / GED  Yes  No

Military Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**C. HEALTH ASSESMENT**

Do you wear corrective lens?	Yes No	Are you diabetic?	Yes No
Do you have any vision problems?	Yes No	Do you take insulin shots?	Yes No
Is your blood pressure normal?	Yes No	Are you color blind?	Yes No
Do you have any heart conditions?	Yes No	Is your hearing normal?	Yes No
Are you epileptic?	Yes No	Any history of back or knee injuries?	Yes No
Do you have sleep apnea?	Yes No		

A drug screen is mandatory in the trucking industry. Are you currently taking any medications? \_\_\_\_\_

**D. EMPLOYMENT HISTORY**

Are you currently employed? Yes No Occupation \_\_\_\_\_ Full Time Part Time

**E. CHARACTER HISTORY/REFERENCES**

Have you been convicted of a felony? Yes No  
 Have you been convicted of a misdemeanor? Yes No  
 Are you currently on parole? Yes No

**Personal References:**

Name	Relationship	Address	Phone

**F. DRIVING EXPERIENCE AND QUALIFICATIONS**

**List Driver’s Licenses Held:**

State	License #	Type	Expiration Date

**Accident Record for Past 3 Years. If none, write “none”:**

Date	Nature of Accident	Fatalities	Injuries

**Traffic Convictions & Forfeitures for the Past 3 Years. If none, write “none”:**

Location	Dates	Charge	Penalty

1. Have you had any accidents in the last 3 years?  Yes  No
2. Has your license been suspended within the last 3 years?  Yes  No
3. Have you had any moving violations in the last 3 years?  Yes  No
4. Have you ever been denied a license, permit or privilege to operate a motor vehicle?  Yes  No
5. Has a license, permit or privilege ever been suspended or revoked?  Yes  No
6. Have you ever been stopped/arrested/convicted for driving under the influence of drugs of alcohol or have a current charge pending?  Yes  No
7. Have you ever been arrested/convicted for possession, sale or use of a narcotic drug, amphetamine or other derivative thereof or have a current charge pending?  Yes  No
8. Have you ever been convicted of a crime or have a current charge pending?  Yes  No
9. Have you ever been convicted of an offense involving the use of drugs or alcohol?  Yes  No
10. Have you ever tested positive on any drug test, tested at a breath alcohol concentration level of 0.02% or greater on a breath alcohol test, or refused to take a drug or alcohol test when you were required to do so in accordance with any federal regulation or a previous/current employer’s company policy?  Yes  No
11. Have you ever committed any other violation of DOT drug and alcohol testing regulations?  Yes  No

IF THE ANSWER TO ANY QUESTION (1-11) IS “YES”, ATTACH STATEMENT GIVING DETAILS.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONTROLLED SUBSTANCES/ALCOHOL TESTING POLICY ACKNOWLEDGEMENT [49 CFR §382.601]**

This policy and all testing procedures follow USDOT and FMCSA regulations found in 49 CFR Parts 40 and 82, which are incorporated in to this policy, and are available to all student drivers. The person designated to answer student driver trainee ("student") questions about these materials is the school program or training director. All students who drive BCTC Commercial Motor Vehicles (CMVs) that require a CDL are subject to controlled substances and alcohol testing. This policy applies during the period in which the student applies for and is enrolled in a training program and is involved in training or is otherwise performing a safety sensitive function (SSF), until the time training terminates. Performing a SSF includes all time spent at any BCTC training location (whether or not BCTC property) of with any BCTC staff during training; all time waiting to drive, inspecting or servicing a CMV or other equipment; all time spent at the driving controls of a CMV (whether operating or not); and all non-driving time in or around a CMV. Pursuant to 49 CFR Part 382, Subpart B, the following student driver conduct is prohibited: reporting for training or performing a SSF with an alcohol concentration of 0.04 or higher or when using a controlled substance: using alcohol while in training or performing a SSF, performing a SSF within 4 hours after use of alcohol; using alcohol within 8 hours following an accident; refusing to submit to a drug or alcohol test; or reporting for training or continuing training after a positive or verified adulterated or substituted test. Students will be tested as necessary pursuant to Part 382 under the following circumstances: pre-employment testing (as part of the training admissions process), post accident testing, random testing, reasonable suspicion testing (and return to duty and follow-up testing to the extent authorized). All students are required to submit to alcohol and controlled substance testing. Refusal to submit to such testing is defined in §382.107 and includes (but is not limited to) failing to either appear for a test within a reasonable time; remain at the test site until testing is complete; provide a urine specimen or a sufficient amount of urine; permit observation of collection; take a second test as directed by BCTC, undergo an MRO-required medical exam; or cooperate with the test process. Any student who is reported by the MRO as having a verified adulterated or substituted test result will also be considered a refusal. Students found to have violated or engaged in conduct prohibited by Part 382 Subpart B must immediately cease all SSF, including operating a CMV, may be terminated from the program, and shall in no event perform a SSF unless all requirements of 49 CFR Part 40, Subpart O (Substance Abuse Professional and Return-to-Duty Process) have been met. Students tested for alcohol with results at or above 0.02, but below 0.04 will be removed from the training for at least 24 hours and may be terminated from the program. Information concerning the effects of drug and alcohol abuse, as well as local counseling and assistance programs, is available from the school. A list of SAP providers is available to any driver testing positive at [www.saplist.com](http://www.saplist.com). Any suspected student drug or alcohol use must be reported to the school director immediately. By signing the Application, I agree to the terms of this policy.

**POSSESSION/USE/TRANSFER OF DANGEROUS WEAPONS**

It is unlawful for anyone to possess lethal weapons in a school or on a school property. The term "weapon" refers to a loaded or unloaded firearm (including pellet guns, BB guns and look-alike firearms); explosive devise of any kind, ammunition, any Bowie knife, straight-bladed dagger, lock-blade or any instrument or knife-like instrument with a sharp cutting edge; or any other tool that is not reasonably related to education, such as chains, metal spikes, brass knuckles, night-sticks, saps, axe handles, etc. A student is in possession of an illegal and/or banned items(s) under this policy when such item is found on the person of the student, or under his/her control, on property being used by the school or while student is on his/her way to or from school. No student shall possess or knowingly assist or accompany any student who possesses any weapon on or in any property of the school; such property shall include, by way of example and not limitation: grounds, buildings, vehicles and the CDL driving range and trucks. By signing the Application I agree to the terms of this policy

**EXEMPTION FROM DRIVER INVESTIGATION [49 CFR §391.23(c)(4)]**

Applicant verifies that he/she has no previous employment experience working for a DOT regulated employer during the previous three (3) years, and therefore no investigation is possible of safety performance or alcohol/controlled substances history per 49 CFR §391.23 or §382.413.

**IMPORTANT STUDENT NOTICE**

All of the information provided by me in this application is true and correct. The student authorizes BCTC to verify information provided by the student, including employment verification, reference checks, criminal and motor vehicle records, and obtaining any educational records or transcripts. Any untrue or misleading information may be the basis for denial of admission, disqualification from the training program. Failure to pass the required DOT physical or drug screen will result in disqualification from the training program.

A partial tuition payment of \$2,500.00 is required to reserve a space in a specific class. The payment will be applied to the total tuition amount due. Student cancelations will result in a \$500.00 processing fee. Student will be refunded tuition paid minus the \$500.00 processing fee. If the student transfers to another class a \$500.00 transfer fee will be charged.

I acknowledge that enrollment in, and graduation from, the BCTC CDL truck driving program is NOT AN OFFER FOR, OR GUARANTEE OF, EMPLOYMENT. I recognize that training for and working in the trucking industry with heavy equipment can be dangerous and may cause injuries; I ASSUME THE RISK and accept full responsibility for this situation, and hereby release and indemnify BCTC from any and all claims, actions, suits, liabilities, judgments, and proceedings arising in whole or part from my acts or omissions related to attending BCTC.

Berks Career and Technology Center will not discriminate in its employment practices or its educational programs and activities on the basis of race, color, age, creed, religion, gender, sex, sexual orientation, ancestry, domicile, veterans status, national origin, marital status, pregnancy, handicap/disability or genetic information or any other legally protected characteristics in its admission procedures, educational programs and activities or employment practices, as required by the Pennsylvania School Code and related regulations, ADA, Title VI, Title IX, and Section 504 and will provide equal access to the Scouts of America and other designated youth groups. Students are encouraged to consider enrolling in career programs non-traditional to their gender. Berks Career and Technology Center will take steps to assure that the lack of English language skills will not be a barrier to admission and participation in career and technical education programs and will make reasonable accommodations for those with disabilities. Furthermore, harassment in any form, including bullying, by any individual will not be tolerated. All policies, regulations and practices of BCTC shall be guided by this statement. Inquiries regarding compliance with Title IX, Section 504 or Title VI should be directed to the Office of the Executive Director at 1057 County Road, Leesport, PA 19533, 610-374-4073

Berks Career and Technology Center no discriminará por razones de raza, color, edad, religión, sexo, orientación sexual, origen, domicilio, si es veterano, nacionalidad, estado civil, embarazo, incapacidad o cualquier otra característica protegida legalmente en su proceso de empleo, programas educativos ni actividades o proceso de admisiones como es requerido por el Código Escolar del Estado de Pennsylvania y las regulaciones ADA, Título VI, Título IX y Sección 504 y proporcionará un acceso igualitario a los Exploradores de America y otros grupos de jóvenes designados. Fomentamos que todo estudiante considere registrarse en programas educativos no tradicionales a su sexo. Berks Career and Technology Center tomara pasos para asegurar que la falta de conocimiento de Ingles no sea una barrera para su admisión y participación en los programas educativos y técnicos. También se harán acomodaciones razonables para personas con impedimentos físicos. Cualquier forma de acoso, incluyendo intimidación por parte de cualquier individuo no será permitida. La política, regulaciones y prácticas de BCTC serán guiadas por esta declaración. Dudas o preguntas acerca del cumplimiento del Título IX, Sección 504 o Título VI deberán dirigirse a la oficina del Director Ejecutivo en 1057 County Rd, Leesport PA 19533, 610-374-4073.

I understand the basic terms of my agreement with BCTC. I agree to pay the remaining tuition balance and/or set up a payment plan on or before the first day of class.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*\*\*FOR SCHOOL USE ONLY – DO NOT WRITE BELOW THIS LINE\*\*\*\*\*

Recommendation to Admissions Committee for further consideration? \_\_\_Yes \_\_\_No

Appearance	_____	Commitment to Career	_____	Career Change	_____
Attitude	_____	Responsibility	_____	Motivation	_____
Employability	_____	Financial Commitment	_____	Aptitude	_____

Admission:  Accepted  Denied

Registration Fee Paid:  Yes  No

School Official \_\_\_\_\_

Date: \_\_\_\_\_

Remarks:

- Copy of License     MVR     DOT Physical     Diploma/GED     Drug Screen