

APPLICATION FOR CDL FUNDING



NAME OF SCHOOL: _____

Applicant Information

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

How did you learn about our CDL funding? _____

Phone: _____ E-Mail: _____ Gender: M F

Which of the following do you consider yourself?:

African American _____ Asian American _____ Bosnian _____ Hispanic/Latino _____
Native American _____ Portuguese _____ White _____ Other: _____

What is your country of origin? _____ Is English your first language? Y N

If no, Will you need any help reading or understanding the English required to pass the written part of the test? _____

Do you have a valid Vermont driver's license?: _____ If so, what is the number? _____

Do you have reliable transportation? Y N

PLEASE NOTE: PART OF THIS COURSE IS A REQUIRED DRUG TEST AND A PHYSICAL EXAM. IF YOU THINK YOU MIGHT NOT BE ABLE TO PASS BOTH OF THESE REQUIREMENTS, PLEASE CONTACT BETH MEYER-EHRICH BEFORE SUBMITTING THIS APPLICATION.

Employment Information

Are you currently employed? _____ If so, with what company? _____

What is your job (what types of things do you do)? _____

Employment Goals

What kind of truck are you interested in driving? Plow Truck Dump Truck Passenger Bus
Tractor Trailer Box Truck

What companies would you like to work for? _____

Are you interested in working for VTrans? Y N Have you filled out a VTrans Temporary Application? Y N

Permanent positions with VTrans can be applied for online. Please visit: <http://humanresources.vermont.gov/careers>

Are you interested in working in highway construction as a PAID On the Job Trainee? Y N

I give my permission for this information to be shared with CDL driving schools and/or prospective employers.

Signature _____ **Date** _____

PLEASE COMPLETE AND SEND OR EMAIL TO: Beth Meyer-Ehrich, OJT Program Manager
Office of Civil Rights and Labor Compliance
One National Life Drive
Montpelier, VT 05633-5001
Phone: 802.828.2715 Fax: 802.828.1047
Email: beth.meyerehrich@vermont.gov