

OHIO PRE-SERVICE SCHOOL BUS DRIVER TRAINING APPLICATION FOR CERTIFICATION T-9

T9 INFORMATION MUST BE SUBMITTED THROUGH ODE'S WEB-BASED REPORTING SYSTEM

I. Name: _____ CDL No.: _____ Employer: _____
 Address: _____ Date of Birth: _____ School District: _____
 City, State, Zip: _____ Address: _____
 City, State, Zip: _____

II. NEW DRIVER REQUIREMENTS

Mo/DaY/Yr and drivers whose employment has been interrupted for a period of six or more years

1. Classroom hours with Ohio Pre-Service School Bus Driver Training Instructor were attended at: _____
 In the county of: _____ (Pre-service class valid for 12 months from date of last day of class)
 2. On-The-Bus Instruction and Driving Evaluation administered by certified OBI and/or Pre-Service Instructor

OBI Pre-Trip Score: _____ OBI Driving Evaluation Score: _____
 OBI Signature _____

3. Issue Date of Commercial Drivers License from deputy registrar

4. In accordance with O.A.C.3301-83-10-A-4, the Applicant was issued a Temporary Three-Month Certificate. As noted in Item 1, the classroom portion of training was not completed prior to items 2 and 3.

To be completed by transportation administrator

- IV. The above requirements have been completed in accordance with Ohio Regulations. A copy of the following documents is on file at the bus owner's facility:
1. Satisfactory T-8 School Bus Driver Physical Examination
 2. Satisfactory Drug-Alcohol test results and if required FMCSA Check Form
 3. Satisfactory semi-annual ODE Driver Record Check
 4. Completed and received satisfactory criminal background checks from BCI & I
 5. School Bus Driver Training Records
 6. Evidence of training related to Drug and Alcohol

Transportation Administrator's Signature _____

III. RECERTIFICATION REQUIREMENTS

Mo/DaY/Yr and drivers whose employment has been interrupted for a period of two or more years

1. Classroom hours with Ohio Pre-Service School Bus Driver Training Instructor were attended at: _____
 In the county of: _____ (Recent class valid for 12 months from date of last day of class)
 2. Or in place of classroom hours in item 1, attended all of the Ohio Advanced School Bus Training Program (24 months prior to expiration of certificate)

OBI Pre-Trip Score: _____ OBI Driving Evaluation Score: _____
 OBI Signature _____

3. On-The-Bus Instruction and Driving Evaluation administered by certified OBI and/or Pre-Service Instructor

4. Or in place of driving evaluation, competed in a Regional or State School Bus Safety ROAD-E-O and scored 80% of the total possible points. (24 months prior to expiration of certificate)
 ROAD-E-O Score _____ Regional/State _____ Year 20 _____

7. Evidence of training related to Blood-borne Pathogens
8. In-service training records and Annual Driving Certificate
9. Route observation with experienced driver and students onboard
 Date: _____
10. Drove route with experienced driver and students onboard
 Date: _____

Driver's Signature _____

All Pre-Service Training Certificates expire 6 years from the date of issue. Attach a copy of approved certificate to this document and keep on file for 6 years and provide a copy of certificate to driver.

