



INSTRUCTIONS/INFORMATION

- Complete page 1 and page 2 of this form and sign the Certification section. **Please print clearly.**
- In order to be certified, you must have a valid commercial driver license with appropriate endorsements. You must be properly licensed in the class in which you will be testing drivers.
- If your commercial driver license was issued by a state other than New York, attach a recent certified driver license abstract from the state that issued your license.
- You must have an acceptable driving record (no more than 6 points accumulated on your record within the preceding 18-month period).
- Mail this completed, signed form and required documentation to the following address:

Bus Driver Unit  
 NYS Department of Motor Vehicles  
 6 Empire State Plaza Room 331  
 Albany, NY 12228

If your application meets initial qualification standards, you will be notified by mail to contact a Motor Vehicles Testing and Investigation Unit to schedule a Certified Examiner qualifying interview that will include a written test, a vision test, and a road test. **Do not contact the Motor Vehicles Office until you receive that notice.**

APPLICANT INFORMATION

Driver's Last Name						
First Name			Middle Initial	Date of Birth (mm/dd/yyyy)		<input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address						
City				State	Zip Code	County
ID Number from Driver License	State	License Class	Endorsements	Restrictions		Expiration Date
Daytime Telephone No. (      )		E-mail Address				
<b>Certification Class Requested</b> - Check Class of vehicle in which you will be testing. <input type="checkbox"/> Class B <input type="checkbox"/> Class C			<b>Freelance</b> - Occasionally DMV will get requests for the names of Certified Examiners who are available to do independent examiner work. Do you want to be included on such a list? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of Current 19-A Carrier Employer						
Federal Employer ID Number (FEIN)			Article 19-A Business ID Number			

**EXPERIENCE**

I have a minimum of 2 years experience in driver training and the evaluation of the driving ability of others. (Provide information about your employer(s) below. Attach a separate sheet if you need more space to document your experience.)

Employer Name and Address	Dates Employed		Class of License Held
	From:	To:	
1. _____			
2. _____			

**AND**

I have a minimum of 18 months experience in the last 3 years while employed by a 19-A carrier in the operation of the type of vehicle in which I will be testing. (Provide information about your employer(s) below. Attach a separate sheet if you need more space to document your experience.)

Employer Name and Address	Dates Employed		Class of License Held
	From:	To:	
1. _____			
2. _____			

**EDUCATION**

In addition to the above experience, you **MUST** have completed one of the following courses. Check the box that applies to you.

- I have successfully completed a college-level course with a minimum of 4 credit hours in driver education instruction. (Attach a copy of your transcript.)

**OR**

- I have successfully completed a DMV-approved course in driver training and traffic safety for 19-A Certified Examiners. (Attach a copy of your course certificate.)

**EXCEPTION**

You may be able to provide special affidavits if you do not have a minimum of 18 months experience in the last 3 years while employed by a 19-A carrier in the operation of the type of vehicle in which you will be testing. Attach documentation outlining your experience and training and any other special circumstance which might qualify you to become a certified examiner. The Bus Driver Unit will review your information and determine whether it is acceptable.

**CERTIFICATION**

I, the Undersigned, certify that the information I have provided in this application is true and accurate, and I have read and understood Article 19-A of the New York State Vehicle and Traffic Law and Commissioner's Regulations, Part 6.13 (15 NYCRR 6.13). I acknowledge and understand that any false statement I make on this application is punishable as a misdemeanor under Section 392 of the New York State Vehicle and Traffic Law, and the Department of Motor Vehicles (DMV) has the discretion to terminate its authorization for conducting such testing upon evidence satisfactory to DMV that I have knowingly engaged in any fraudulent or deceptive acts in connection with the conduct or reporting of any commercial driver test.

Applicant's Signature: **X** \_\_\_\_\_ Date: \_\_\_\_\_

**CARRIER ENDORSEMENT**

I endorse this applicant to be a Certified Examiner for my company.

Current 19-A Employer Name (please print): \_\_\_\_\_

Current 19-A Employer's Signature: **X** \_\_\_\_\_ Date: \_\_\_\_\_