

SCHOOL BUS DRIVER INSTRUCTOR CERTIFICATION



Check Only One:

- Initial Certification
 - Provided by Instructor Coordinator _____
- Annual Renewal of Certification
 - Date & Location of Required Update _____
 - Date of Last Driver Training Instructed _____
- Change/Correction of Information

INSTRUCTOR INFORMATION

Instructor Name: _____ Instructor Number: _____
 Driver License #: _____ Phone #: _____
 Fax #: _____
 Mailing Address: _____

EMPLOYER INFORMATION

School District/Contractor/IU Name: _____
 Phone #: _____ Fax #: _____ Email Address: _____
 Mailing Address: _____

NOTE: If the Instructor relocates out of the School District, Intermediate Unit; terminates employment with the School District, Intermediate Unit or School Bus Contractor; or retires, that Instructor must provide an endorsement from their Supervising Instructor Coordinator clarifying their need for continued appointment as an Instructor.

AFFIDAVIT FOR CERTIFICATION AS AN INSTRUCTOR

I swear and affirm that I have been provided with a copy of the School Bus Driver Training Program Administrative Procedures Dated October 2010 and Chapter 71.4 relating to the driver's examination and Chapter 71.5, relating to courses of instruction. I understand and agree that failure to administer the training program as prescribed by these documents will result in the decertification or suspension of my Instructor privilege. I attest that I have a valid Commercial Driver's License with a Passenger Endorsement. A copy of my current Driving History has been provided to my Instructor Coordinator for retention.

Signature: _____
 Instructor Number: _____ Date: _____

SUPERVISING INSTRUCTOR COORDINATOR INFORMATION

This section must be initialed and signed by the supervising Instructor Coordinator.
 Instructor Coordinator, please initial each statement below:

1. _____ I swear and affirm that I have been provided with copies of the School Bus Driver Training Program Administrative Procedures and 67 PA Code Chapter 71, School Bus Drivers. I understand the roles and duties of an Instructor.
2. _____ I understand that failure to administer the training program as prescribed by 67 PA Code Chapter 71 and the School Bus Driver Training Program Administrative Procedures will result in the decertification or suspension of the Instructor.

Name: _____ Phone Number: _____
 School District/IU: _____
 Signature: _____ Date: _____