REGION 10 EDUCATION SERVICE CENTER
SCHOOL BUS DRIVER SAFETY TRAINING PRE-REGISTRATION FORM

Please check the appropriate class type:

( ) 8-Hour Re-Certification Course

► **Drivers previously certified outside of Region 10 must have a copy of their previous certification submitted when pre-registering for the re-certification course.**

Title 37 Texas Administrative Code §§14.32 (B) the recertification safety training course, Texas School Bus Driver Safety Training Recertification Course, shall consist of a minimum of eight clock-hours of instruction. §§14.35 (e) Regardless of the reason, any course instruction missed must be completed by arrangement with the training agency. Except as approved by the training agency, all course requirements for certification must be completed within the 180-day period immediately following the start of instruction, otherwise no credit will be given for any class sessions previously attended. The entire course must be completed prior to awarding certification.

( ) 20-Hour Certification Course

Title 37 Texas Administrative Code §§ 14.32(3) (A) the initial certification training course, Course Guide for School Bus Driver Training in Texas, shall consist of a minimum of twenty clock-hours of instruction. §§ 14.35(e) Regardless of the reason, any course instruction missed must be completed by arrangement with the training agency. Except as approved by the training agency, all course requirements for certification must be completed within the 180-day period immediately following the start of instruction, otherwise no credit will be given for any class sessions previously attended. The entire course must be completed prior to awarding certification

[Please indicate the **location & date of class** for which drivers are being registered.]

TRAINING SITE:_____ DATE:_____

Participants must make-up any portion of the class that is missed due to being late or absent or off-task.

Please Print: [*driver's license copies are not required when submitting just this form*]

	Driver's License Number	**Driver's Full Legal Name –** as it appears on the driver's license **LAST, FIRST MIDDLE**	**Driver's Date of Birth** **[mm/dd/yyyy]**
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Information may be typed and the form sent as an attachment via email [either in Word or a pdf document]. Faxed forms must have a signature.

Authorized District Official: _____

Printed Name & Title **Signature of Authorized District Official**

School District Name: _____ Co-Dist.# : _____

Transportation Services Provided By: [ ] District [ ] Transportation Company Name: _____

Email Address: (1) _____ (2) _____

Primary Contact Secondary Contact: Email Address and Name

Area Code/Phone Number: [ ] _____ **Area Code/Fax Number: [ ]** _____

PLEASE FAX THIS COMPLETED FORM TO:
Lou Autry
Fax: 972/348-1327

OR EMAIL THIS COMPLETE FORM TO:
Lou.Autry@region10.org

OR CALL IF YOU HAVE QUESTIONS: Lou Autry @ 972.348.1326

OR MAIL TO:
Lou Autry
School Bus Driver Safety Education Training
Region 10 ESC
904 Abrams Rd.
Richardson, TX 75081

Pre-registrations should be sent as soon as the district / driver decides which class is to be attended. Faxed pre-registration forms must be signed by the Transportation Director/Supervisor or Superintendent or their designee. **To waive invoicing, pre-registration cancellations must be received in the School Bus Driver Safety Education Training office @ Region 10 ESC no later than 5 Region 10 ESC work days prior to the start of the class for which the driver is pre-registered.**

09-10