



Louisiana Department of Public Safety
Office of Motor Vehicles
Application for Third Party Examiner Training Course

Company Information	
Name of Company	
Address	
City/State/Zip	
Phone	

Applicant Information					
Applicant's Name					
CDL Number		Class		Restrictions	
Applicant's Cell Number					

Answer the following questions:	Yes	No
Is the employee considered a full time employee of the company?		
Does the applicant have a High School Diploma or equivalent?		
Does the applicant have the moral character necessary to conduct all CDL skills tests in a manner reflecting their seriousness, and their impact on the public safety?		
Will the applicant represent your company and the Office of Motor Vehicles in a professional and responsible manner?		

Signature of Examiner Applicant's Supervisor

Title



Louisiana Department of Public Safety
Office of Motor Vehicles
Initial Application for Certified Third Party Examiner Status

The fee for this application is \$10.00 for each examiner.

Personal Information			
Name		Date of Birth	Examiner #
Home Address		City/State/Zip	
Home Phone		Personal Cell	

Credential Information			
CDL #		Expiration	Class
Endorsements		Restrictions	

Employer Information			
Employer's Name		Phone	
Address		City/State/Zip	
Job Duties			

Answer the following questions:		Yes	No
Are you considered a full time employee of the company?			
Do you have a High School Diploma or equivalent?			
Year of Graduation:			
Name of High School:	City/State:		
Is your driver's license, currently, suspended and/or disqualified?			
Has your driver's license been suspended, cancelled, or revoked within the last three (3) years?			
If yes, list the state and reason.			
Have you ever been convicted of any fraudulent activities or a felony?			
If so, when and what was the charge?			
Have you been provided with a copy of Louisiana R.S. Title 32:408, 408.1, and 408.2, Title 55 rule 117 and 119, and do you understand these provisions of law?			
Do you agree to conduct all CDL examinations in a manner reflecting their importance to society, their seriousness to the individual, and their impact on public safety?			

I hereby certify that the above information is true and correct.

Signature of Examiner Applicant

Date

Third Party Examiner/Agent Agreement

Be it known that on this _____ day of _____, 20____, that I reviewed the Third Party Tester Agreement entered into by my employer and the Louisiana Department of Public Safety and Corrections, Office of Motor Vehicles, and do hereby agree with the terms of said agreement, as it relates to my responsibility as a third-party examiner/agent. I further understand that if OMV receives information that my medical certificate qualifications have changed, OMV will act on that information.

Signature of Examiner Applicant

Memorandum for E-mail Account Requirement

Companies and their examiners are required to obtain and maintain a valid e-mail account. This email account will be used on a regular basis for important updates to the CDL program and must be checked on a regular basis. Failure to obtain, maintain, and provide the e-mail account may result in rejection of your third party tester/examiner application. Please complete the bottom portion of this form and submit it with your application.

Company Name			
Company Official		Email	
Examiner		Email	

If you have any questions, please contact a CDL Consultant:

- **Phone:** (225) 223-1163 or (225) 223-3868
- **Fax:** (225) 925-3901
- **Address:** Office of Motor Vehicles
Attn: CDL Consultants
P.O. Box 64886
Baton Rouge, LA 70896

Affidavit of Third Party Examiner

Be it known that I, _____, CDL examiner # _____, employed by _____, a certified Third Party Tester, certify that I am thoroughly knowledgeable in all parts of the CDL Examiner's Manual, all the standardized instructions, all the specific test scoring criteria, test score sheet, and examiner's responsibility. All skills test administered by me will be done at the approved location and scored strictly according to the written standards.

My skills test scoring procedure for the in-cab brake check will be performed correctly for the applicant to receive scored credit. I am aware that a driver applicant's failure to perform all of the parts of the brake check will be an automatic failure of the vehicle pre-trip inspection test.

My Basic Controls Skills (BCS) test is as described in the current CDL Examiner's Manual. All the maneuvers in my BCS course meet the dimensional standards as described in the CDL Examiner's Manual and the boundary lines for the maneuvers are marked with traffic cones for clarity.

All the maneuvers described in the Road Test section of the CDL Examiner's Manual are included in my CDL road test route. I have prepared a road test route map and 4-column route direction sheet in accordance of the specifications in the CDL Examiner's Manual. The road test route described will be followed in its entirety with every CDL driver applicant and that no other route will be used unless approved in writing by OMV.

In a secured location at my workplace, I will maintain a detailed record of every driver applicant who I have administered a CDL skills test to, whether or not the driver passed or failed the test, in accordance with the Third Party Tester Agreement entered into by my employer.

Signature of Examiner Applicant

Date

Signature of Company Official

Date

Disclosure of Rights to Applicants

As an applicant for a position requiring fingerprints to be submitted to the Louisiana Bureau of Criminal Identification and Information - Louisiana Criminal Justice Systems (BCII-LCJIS), and the Federal Bureau of Investigation, **your fingerprints will be submitted to these agencies to check State and FBI records** (LA RS 15:587). The results of these checks will be reviewed and securely stored by the individual(s) authorized to receive these results and only be used for the purpose described.

Discrepancies

Your Louisiana record can be challenged and corrected by contacting the Louisiana Bureau of Criminal Identification and Information at 7919 Independence Blvd., Baton Rouge, LA 70806, or by calling the BCII-LCJIS at (225) 925-6095. Additional information is available at <https://www.lsp.org/about/leadershipsections/support/bcii-lcjis/> . The Authorization and Disclosure forms associated with the Right to Review Process are needed.

The U.S. Department of Justice Order 556-73 establishes rules and regulations for the subject of an FBI Identification Record to obtain a copy of his or her own record for review. The FBI's Criminal Justice Information Services (CJIS) Division processes these requests. Records from the FBI or relating to another state can be challenged through the FBI. Information, can be found at their website at <https://www.fbi.gov/> .

How to Request a Copy of Your Record from the FBI:

The FBI offers three methods for requesting your FBI Identification Record or proof that a record does not exist. Information on each option can be found at <https://www.fbi.gov/how-we-can-help-you/more-fbi-services-and-information/identity-history-summary-checks> .

Option 1: Electronically Submit Your Request Directly to the FBI at <https://www.edo.cjis.gov/#/>

Option 2: Submit Your Request Directly to the FBI via the mail.

Option 3: Submit Your Request to an FBI-Approved Channeler.

Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose, you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.

- When you submit your fingerprints and associated personal information, you must be provided a written FBI Privacy Act Statement (dated 2013 or later).

- You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record or decline to do so before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
- You may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.edo.cjis.gov> and <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.
- If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.edo.cjis.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or

authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

By signing below, I acknowledge I have received, reviewed and understand the Disclosure of Rights to Applicants and Noncriminal Justice Applicants Privacy Rights. This copy will be attached to the CDL Third Party examiner application.

Name of applicant (print)

Signature of applicant

Date signed