



KENTUCKY STATE BOARD FOR PROPRIETARY EDUCATION

P.O. Box 1360, Frankfort, Kentucky 40601 ~ 911 Leawood Drive, Frankfort, Kentucky 40601

Phone (502) 564-3296, Fax (502) 696-4961 ~ <http://bpe.ky.gov>

APPLICATION FOR NON-RESIDENT COMMERCIAL DRIVER LICENSE TRAINING SCHOOL

INSTRUCTIONS

1. This application shall be typed or printed legibly and completed in its entirety.
2. This application and all supporting material must be submitted with the application fee of Two Hundred Dollars (\$200.00), along with the initial licensure fee of Nine Hundred Dollars (\$900.00). Upon submission of this application a contribution to the Student Protection Fund in the amount of Nine Hundred Dollars (\$900.00) is required in accordance with KRS 165A.450. The application fee and contribution must be paid separately. These fees are non-refundable. All fees must be paid by check or money order made payable to the **Kentucky State Treasurer**. DO NOT SEND CASH.
3. Attach continuation sheets if more space is needed to provide information.
4. Refer to KRS 165A.475 and 201 KAR 40:050
5. This completed form may be submitted to the Kentucky State Board for Proprietary Education either by mail to P.O. Box 1360, Frankfort, KY 40602, or by delivery to 911 Leawood Drive, Frankfort, KY 40601.

SCHOOL INFORMATION

School Name	Date
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Street Address	City	State	Zip Code
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Telephone Number	Fax Number	Website Address
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Administrative Contact Person Name	Title	Email Address
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Administrative Contact Person Address	City	State	Zip Code
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Administrative Contact Person Phone #	Fax Number	Email Address
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Has the school ever been cited to cease and desist operation from any act or practice by the Federal Trade Commission? Yes No

If yes, please explain _____

Has the school ever been cited to cease and desist operation in another state? Yes No

If yes, what State? _____ Explain: _____



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Has the school ever been refused approval by a Federal Agency, State Agency, or a National Accrediting Association? Yes No

If yes, please explain

Is your school licensed in any other state as a resident or non-resident school? Yes No

If yes, please list all states

List name of approvals by all federal agencies, state agencies and accrediting agencies.

OWNER INFORMATION

Type of Ownership Entity Corporation Limited Liability Company Partnership Individual

Name of Ownership Entity Date and State of Corporation

Street Address City State Zip Code

School Owner Name Percent of Ownership Telephone Number

Street Address City State Zip Code

School Owner Name Percent of Ownership Telephone Number

Street Address City State Zip Code





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ADMINISTRATION AND SUPERVISION

List name and title of all management, administrative, and supervisory personnel.

Chief Administrator Name _____ Title _____

Instructional Program Contact Name _____ Title _____

Name _____ Title _____

Name _____ Title _____

HOURS OF OPERATION

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

TOTAL NUMBER OF INSTRUCTIONAL STAFF

Number of Full-Time Instructional Staff	_____
Number of Part-Time Instructional Staff	_____

TOTAL NUMBER OF AGENTS/RECRUITERS

Number of Full-Time Agents / Recruiters	_____
Number of Part-Time Agents / Recruiters	_____

PROGRAM INFORMATION

Name of Course	Type of Program (Certificate / Diploma)	Estimated Time to Complete	Length of Program	Hrs/Wks/Credit Hours

List all Federal and / or State Financial Aid programs offered by the school.

Name / Title: _____ Type: _____

Name / Title: _____ Type: _____



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Does your school offer job placement assistance?

Yes No

If yes, please give details

SUPPORTING MATERIAL

The following supporting documentation must be submitted with this application.

- Proprietary School Bonded (PE-005) or an irrevocable letter of credit at a financial institution made in favor of the Kentucky State Board for Proprietary Education and in the minimum amount of \$20,000.
- Student Contract Forms
- Student enrollment form, complete with school's refund policy. Refund policy must be the same as in the school catalog.
- Sample of certificate, diploma issued upon successful completion of program(s).
- School financial statement. Submit balance sheet type of financial statement for school, only certified as a true and correct by the appropriate school official or CPA.
- School catalog, bulletin, brochure, or other duplicated publication distributed to students. This document must be certified as true and correct in content by the appropriate school official and must contain the following information:

1. Title, volume number, and date of issue.
2. Official name of the school, its governing body, official, and faculty.
3. A calendar of the school showing legal holidays, beginning and ending dates of each quarter, term, or semester, and other important dates.
4. School policy and regulations regarding enrollment with respect to enrollment dates, specific entrance requirements for each course.
5. School policy regarding absence, class cuts, make-up work, tardiness, and interruptions for unsatisfactory attendance.
6. School policy and regulations relating to standards of progress required of the student. This policy should define the grading system of the school; the minimum grades considered satisfactory; grades or progress; and a description of the probationary period, if any, allowed by the school; and conditions of re-entrance for those students dismissed for unsatisfactory conduct.
7. School policy and regulations relating to student conduct and conditions for dismissal for unsatisfactory conduct.
8. Detailed schedule of fees, charges for tuition, books, supplies, tools, student activities, laboratory fees, services charges, rentals, deposits, and all other charges.
9. School policy and regulation of the refund policy. This includes the refund of the unused portion of tuition, fees, and other charges in the event the student does not enter the course, withdraws from the course, or the course is discontinued in any manner.
10. A description of the available space and facilities including a floor plan indicating the dimensions of all classrooms, activity areas, laboratories, school office area, etc.
11. A course outline for each course offered for which approval is requested, reflecting subjects or units in each course; type of work or skill to be learned; and the approximate time and clock hours to be spent on each subject or unit.
12. School Policy and regulations relating to granting credit for previous education and training.



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- Copy of liability insurance coverage policy of the facility, instructors, and students while operating the driver training school equipment, and all vehicles including trailers. Documentation must include all serial numbers and / or vehicle identification numbers (See KRS 165A.475 (1) (d) for coverage limits). Documentation must indicate if the vehicle and / or trailer is used on the school premises or is driven on the public roadways.
- Minimum instructor qualifications.

CRIMINAL BACKGROUND CHECKS

State law requires a state and national criminal history background check of all school owners, if incorporated all officers, and school director and / or administrator as a condition of applying for this license. Any person who refused to submit to a criminal history background check shall not be eligible to apply for, or be issued a license to operate a CDL driver training school.

CERTIFICATION

I hereby certify that the contents of this Resident School Application packet as submitted to the Kentucky State Board for Proprietary Education is true and correct in its entirety. In addition, I hereby pledge to follow all laws, administrative regulations, and standards set for under Kentucky Revised Statutes Chapter 165A.

Signature and Title of Authorized School Official Date