



**TEXAS CDL THIRD PARTY EXAMINER APPLICATION**

**SELECT ONE OR BOTH:**

- EXAMINER**
- DESIGNATED RESPONSIBLE PERSON**

**FOR DEPARTMENT USE ONLY**

**ASSIGNED #** \_\_\_\_\_

**APPROVED BY:** \_\_\_\_\_

**DENIED:** \_\_\_\_\_

**EXPIRATION:** \_\_\_\_\_

This application must be submitted by an approved CDL Third Party Skills Testing (TPST) provider. Information provided assists the Texas Department of Public Safety (DPS) in evaluating the applicant's qualifications to participate as an active TPST Examiner and/or Designated Responsible Person in the CDL TPST Program. All information provided will be verified. The Department reserves the right to require additional information and/or record checks at any time during participation in the program.

Complete the entire document (please type or print in ink) as indicated and sign. ***Incomplete information may delay your application.***

APPLICANT INFORMATION	CDL SKILLS TESTING PROVIDER CONTACT INFORMATION
<b>LAST NAME:</b> _____	<b>COMPANY NAME:</b> _____
<b>FIRST NAME:</b> _____	<b>STREET ADDRESS:</b> _____
<b>MIDDLE NAME:</b> _____	<b>CITY, STATE, ZIP:</b> _____
<b>SUFFIX:</b> _____	<b>PHONE:</b> _____
<b>DATE OF BIRTH (mm/dd/yyyy):</b> _____	<b>FAX #:</b> _____
<b>SEX: (CHECK ONE)      MALE      FEMALE</b>	<b>CDL TPST PROVIDER NUMBER:</b> _____
<b>TEXAS DL/CDL NUMBER:</b> _____	<b>COMPANY CONTACT NAME:</b>
<b>CLASS: (CHECK ONE)      A      B      C</b>	_____
<b>ENDORSEMENTS: (CHECK WHICH APPLY)</b>	<b>COMPANY CONTACT TELEPHONE #:</b>
P      S      T      H      N      X	_____
<b>RESTRICTIONS:</b> _____	
<b>EMAIL:</b> _____	
<b>PHONE:</b> _____	

**REQUIRED INFORMATION FROM ALL APPLICANTS (Answer all questions)**

**YES/NO**

1. \_\_\_\_\_ Are you twenty-one (21) years of age or older?
2. \_\_\_\_\_ Have you established domicile in Texas? (military exception applies)
3. \_\_\_\_\_ Have you been previously employed by the Department within the last 365 days?
4. \_\_\_\_\_ Have you had or currently have any driver license cancellations, suspensions, or revocations of driving privileges connected to a moving violation for three (3) years prior to the date of this application?
5. \_\_\_\_\_ Have you been convicted of a felony in the last ten (10) years?
6. \_\_\_\_\_ Have you been convicted of an offense involving fraudulent activity?
7. \_\_\_\_\_ Have you received deferred adjudication for any felony offense? If so, provide the reason and date.  
 \_\_\_\_\_  
 \_\_\_\_\_
8. \_\_\_\_\_ Have you been convicted for an offense of driving while intoxicated, or been suspended for refusing or failing a blood/breath test during the five-year (5) period immediately prior to the date of this application?
9. \_\_\_\_\_ Have you ever been an Examiner or Designated Responsible Person for another company within Texas? If yes, please provide the name of the company(s) and date(s).  
 \_\_\_\_\_  
 \_\_\_\_\_

## Examiner and Designated Responsible Person Qualification Information

To serve as a CDL TPST Examiner and/or Designated Responsible Person in Texas' CDL TPST Program, you must meet the following conditions:

1. Must be twenty-one (21) years of age or older.
2. Cannot have any cancellations, suspensions, or revocations of your driving privileges connected to a moving violation for three (3) years prior to applying to be an Examiner and/or Designated Responsible Person and must not have any thereafter.
3. Cannot have been convicted of a felony offense(s) or a crime(s) involving moral turpitude and/or any convictions for tampering, falsifying, or altering any government record.
4. Must successfully complete the CDL Examiner's training course required by the Department.
5. Must meet and maintain compliance with applicable state and federal laws governing CDL skills testing and the conditions set forth in the Third Party Tester Agreement. Information on applicable laws may be found in Texas Transportation Code §522.023 and 49 Code of Federal Regulations, Part 383, Subpart E.

To serve as a CDL TPST Examiner, you must also have and maintain a valid Texas commercial driver license with the applicable classification (or higher) and have three (3) or more years of driving experience with that classification of license.

\*If you have been previously employed with the Texas DPS, you may not apply as a CDL TPST for at least 365 days from the official date of separation from the Department. Exclusions apply.

## Disclosure

You must initiate your federal background check by visiting any Fingerprint Applicant Services of Texas (FAST) location. To find a location closest to you visit <https://uenroll.identogo.com>. Once this application has been received and processed, your Designated Responsible Person will receive a service code by email. This Service Code is unique to the application process. Do not use this code for another purpose. You are responsible for all fees associated with the federal background check. You cannot administer CDL TPST exams until you have successfully completed the Texas CDL Examiner's training course and have been issued a CDL TPST Examiner's certificate by the Texas DPS.

## Certification

My signature below affirms and attests that the information provided herein is true, correct, and/or not misleading. I fully understand that false information may cause my application to be delayed, denied, cancelled, or revoked. While conducting my duties as a representative of the CDL TPST Program for my CDL TPST Provider, I agree to adhere to the policies and procedures as provided, and that all CDL skills exams I conduct will be administered in accordance with the **CDL Examiner's Manual and applicable state and federal regulations**.

Applicant's signature:

Date:

Sworn to and subscribed before me on this the \_\_\_\_\_ day of \_\_\_\_\_,

\_\_\_\_\_  
Notary Public

## Checklist

To be considered for CDL TPST Examiner and/or Designated Responsible Person certification, you must complete the following:

1. \_\_\_\_ Have an approved CDL TPST Provider submit a completed application on your behalf to the Department.
2. \_\_\_\_ Initiate a federal background check (see Disclosure Section above).
3. \_\_\_\_ Provide to the Department a certified abstract driver record from your current or previous state of licensure if you have not held your Texas driver license for the immediate preceding five (5) years.
4. \_\_\_\_ Upon approval of your application by the Department, successfully complete the CDL Examiner's instructional training and schedule the CDL check-ride(s) exam at one of the Department's consolidated CDL skills testing locations.