Program Information: Commercial Driver License (CDL) Training

Program Overview
160-hour program teaches student basic truck driving skills introducing student to the field of heavy-duty trucking. Safety is emphasized as well as equipment knowledge and State and Federal Department of Transportation rules and regulations. Curriculum includes CTTS/NCSLI CDL Study Manual. Field training and testing is conducted on a one-to-one basis. Program prepares student for a Montana Type 1 Certification Class A License (inter-state). If student is 18 to 21, he/she prepares for a Montana Type 2 Certification Class A License (intra-state).

Program Provider
Program is provided by Bitterroot College UM under the supervision of Commercial Driver License Program Director Curtis Bunton.

Program Location
Bitterroot College, 103 South 9th Street, Hamilton, 59840

Program Schedule (160 hours total)
- Classroom and field lab instruction (120 hours classroom and labs)
  - July 13 – July 31, 2020
    - 8:00 AM – 5:00 PM, Mondays through Fridays (1-hour break for lunch)
- Learner’s Permit
  - Exam taken at state motor vehicle division office; exam follows completion of classroom instruction; Learner’s Permit fee is $50 (not included in program fee)
- Field training (40 hours one-to-one training)
  - Field training follows earning of Learner’s Permit; field training scheduled on a first-come, first-served basis with special scheduling consideration given to non-local students
- State CDL Exam
  - Scheduled after completion of field training; exam is taken at state motor vehicle division office location in Missoula; instructor accompanies student; vehicle used during exam is Bitterroot College tractor trailer; exam cost already included in Learner’s Permit fee
- Endorsements
  - Exams for Tank Endorsement and Double/Trailer Endorsement are taken at student’s convenience at any state motor vehicle division office (no additional fee for endorsement exams)
  - A Hazardous Materials (HAZMAT) Endorsement requires an online application and a scheduled visit to an application center. Visit www.tsa.gov/for-industry/hazmat-endorsement for complete application information.

Program Fee
- Full payment of $5,750 is due by Wed, July 8, 2020 (see application for payment submission instructions)
- Fee includes tuition and books & materials (both classroom and field)
- Fee does not include background check, motor vehicle record, Department of Transportation (DOT) Physical, drug screening sample & results fees, Learner’s Permit, or TSA HAZPRINT (for more information see Program Application Requirements section)
- Refund Policy: 100% refund before payment due date; 90% refund between payment due date and course start date; no refund after course start date

Program Fee Assistance
➤ IMPORTANT: Program Fee Assistance takes time to process; connect with assistance providers ASAP
- Pathways Programs Funding (formerly WoRC), Human Resource Council, 303 North 3rd Street, Hamilton
  - (406) 363-6101: Lisa Kearns, ext. 1 or Holly Montgomery, ext. 2, or Tomie Martin, ext. 3
Program Fee Assistance *(continued)*

- Ravalli County Federal Credit Union - Bitterroot College Roadmap to Success Loans
  - Call 406.363-4631 and ask for a Loan Officer to learn loan details and submit a loan application
- Rural Employment Opportunities (REO) *(for eligibility, must have worked in agriculture within 2 years)*
  - Sesar Bonilla, [sesar@reomontana.org](mailto:sesar@reomontana.org), (406) 274-4172
- Veterans Administration Educational Benefits, [Valley Veterans Service Center](http://www.va.gov), 217 N 3rd St, Suite L, Hamilton
  - Veterans and family members: check your benefits eligibility, call (406) 363-9838 for an appointment
- Veterans Administration Vocational Rehabilitation Services Training Funds
  - Debra Fleig, [debra.fleig@va.gov](mailto:debra.fleig@va.gov), (406) 258-1084; 2681 Palmer Street, Suite N, Missoula
- Vocational Rehabilitation Services Training Funds – *Disability Employment Assistance Program*
  - Sarah Seltzer, [sseltzer@mt.gov](mailto:sseltzer@mt.gov), (406) 375-0203, Bitterroot College, 103 S 9th Street, Hamilton
- Workforce Innovation & Opportunity Act (WIOA) Funding, Human Resource Council, 303 N 3rd Street, Hamilton
  - DeLynn Gardner, [dgardner@mt.gov](mailto:dgardner@mt.gov), (406) 560-1689 or Chelle Twist, [chelle.twist@mt.gov](mailto:chelle.twist@mt.gov), (406) 565-2243
- WIOA Youth Employment Program *(serves ages 14 to 24)*, Human Resource Council, 303 N 3rd Street, Hamilton
  - Shane Kravik, [sek@hrcxi.org](mailto:sek@hrcxi.org), (406) 363-6101, ext. 236

Program Application Requirements *(documentation must be submitted with application)*

- **Current Montana Driver License and must be at least 18 years of age**
  - Present current and valid Montana Driver License when submitting application
- **Background Check**
  - Visit [app.mt.gov/choprs/](http://app.mt.gov/choprs/) and under *Public Users* click on *Start Service*
  - Cost is $20.00; pay online with eCheck, credit card, or debit card
  - Within 14 days of your payment, print background check results, and attach to program application
  - Background check expires after 14 days from your payment
- **Motor Vehicle Record**
  - Visit [app.mt.gov/dojdrs/](http://app.mt.gov/dojdrs/) and click on *Public User* and select 1. To obtain my own driving record
  - Cost is $7.25; pay online with eCheck, credit card, or debit card
  - Print motor vehicle record document and attach to program application
- **Department of Transportation (DOT) Physical**
  - Obtain a DOT Physical through a DOT Certified Medical Examiner ($60-$150)
    - Visit [fmcsa.dot.gov/national-registry-certified-medical-examiners-search](http://fmcsa.dot.gov/national-registry-certified-medical-examiners-search) for a listing of local DOT Certified Medical Examiners
  - Attach Certified Medical Examiner’s proof of DOT Physical to program application

  *Note: certain medical conditions (e.g., insulin-dependent diabetes) may disqualify applicant, require DOT Medical Waiver, or affect employment outlook. For more information on DOT physical qualifications read FMCSR 391.41, FMCSR 391.43, and FMCSR 391.64 or discuss with your healthcare provider.*

- **Drug Screening**
  - Drug Screening Steps:
    1. Call the ChemNet Consortium at *(800) 597-7103* and pre-pay drug testing & collection fee of $55; you will need a credit card or debit card.
    2. Once you have pre-paid your testing and collection fee, visit a local ChemNet partner for sample collection:
      - Dr. David Golie, DC, (406) 375-0800; 105 S 4th St, Hamilton, MT 59840
      - Compliance Monitoring, (406) 529-1789; 2809 Great Northern Loop #200, Missoula
    3. Drug screening results are sent to Bitterroot College; we will notify you of your results.

*Retain Program Information for Your Records*

| Questions? Contact Bitterroot College at (406) 541-3187 or email lea.guthrie@umt.edu or visit [www.umt.edu/bc](http://www.umt.edu/bc) |

5/18/2020
Program Application: Commercial Driver License (CDL) Training

Application Requirements:
1) Must have current and valid Montana Driver License
2) Must submit cleared background check and motor vehicle record with application (see accompanying information for details)
3) Must obtain Department of Transportation (DOT) Physical and submit clean drug screen sample prior to acceptance into program (see accompanying information for details)

Application Deadline is Wed, July 8 for training starting on Mon, July 13, 2020

Submit completed application to:
Bitterroot College UM
103 South 9th Street, Hamilton, MT 59840 | (406) 375-0100 | fax (406) 375-0200
Application questions? (406) 541-3187 or lea.guthrie@umontana.edu

Include with completed application:
☐ Full program fee payment of $5,750 — make check payable to Bitterroot College or pay in person at Bitterroot College with cash, credit card, or debit card (see accompanying information for payment assistance options)
☐ Cleared background check, MT Driver License, and motor vehicle record documentation (see accompanying information for details)
☐ Proof of DOT Physical and submission of drug screen sample (see accompanying information for details)

Full Legal Name: ___________________________ ___________________________ ___________________________

First  Middle  Last

Mailing Address: __________________________________________________________

City: ___________________________ State: ___________ Zip Code: ________________

Preferred Telephone(s): ________________________________________________

Email Address: __________________________________________________________

Date of Birth: ___________________________ Gender (optional): Male _______ Female _______

Summarize previous work experience: ____________________________________________

__________________________________________________________________________

__________________________________________________________________________

(application has two pages – continue to second page)
Summarize previous experience with heavy-duty trucking (if any):

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

What are your employment goals for obtaining a Commercial Driver License (CDL)?

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

By signing this application, I certify that my application information is true and correct to the best of my knowledge, and I understand and agree that falsification or omission of information may result in denial or rescinding of admission to Bitterroot College’s Continuing Education Commercial Driver License Program.

By signing this application, I understand and agree if I begin the program I am ultimately responsible for the full payment of the program fee. If I am applying for program fee assistance, I understand and agree it is my responsibility to provide written confirmation of third party funding approval prior to the start of the program. Finally, I understand and agree if my third party funding is not ultimately received in full or in part, it is my responsibility to pay any remaining program fee balance.

Applicant’s Signature ___________________________ Date _________________________

For Office Use Only

Required Application Materials

____ Complete Application
____ Background Check
____ MT Driver License
____ Motor Vehicle Record
____ DOT Physical
____ Drug Screen

Reviewer’s name:_____________________________________
Review date: ________________________________
Reviewer’s comments:

Circle one: Accepted  Denied

MT Drive License: # __________________________ Exp. Date: ___________ Checked By _________

Payment Type: _______________________________________

Exam Results: _______________________________________

5/18/2020