APPLICATION FOR MILITARY SKILLS TEST WAIVER

The Commercial Driver License (CDL) skills test waiver form may be used by service members who are currently licensed and who are or were employed within the past year (12 months) in a military position requiring the operation of a military motor vehicle equivalent to a Commercial Motor Vehicle (CMV). This waiver allows a qualified service member to apply for a CDL without skills testing. CDL knowledge (written) test(s) cannot be waived.

APPLICANT INFORMATION									
NAME (Last, First, Middle)		STATE /DRIVER LICENSE NUMBER (required) APA		APPLICA	PPLICATION DATE				
RESIDENCE ADDRESS (STREET)	CITY	·	STATE	ZIP COI	E			COUNTY	
MAILING ADDRESS (IF DIFFERENT)	CITY STATE ZIP CODE			DE			COUN	ΤY	
DRIVER RECORD CERTIFICATION									
During the 2-year period immediately preceding this date	e:								
Have you had more than one license (except for a militar	y licens	e)?					YES		NO
 Has your license been suspended, revoked, cancelled or disqualified in this or any state? 						YES		NO	
Have you been convicted of any violations described be	low in a	any type of motor vehicle?							
Being under the influence of alcohol as prescribed by sta	te law						YES		NO
Being under the influence of a controlled substance							YES		NO
Having an alcohol concentration of 0.04 or greater while	operatir	ng a CMV					YES		NO
 Refusing to take an alcohol test as required by a State jurisdiction under its implied consent laws or regulations as defined in 49 CFR 383.72 				fined		YES		NO	
Leaving the scene of an accident							YES		NO
 Using the vehicle to commit a felony (other than manufacturing, distributing or dispensing a controlled substance) 					YES		NO		
Driving a CMV while your CDL is revoked, suspended, ca	Driving a CMV while your CDL is revoked, suspended, cancelled; or you are disqualified from operating a CMV					YES		NO	
Causing a fatality through the negligent operation of a CMV (including motor vehicle manslaughter, homicide by motor vehicle, or negligent homicide)						YES		NO	
Using the vehicle in the commission of a felony involving	manufa	acturing, distributing, or dispensing	a controlle	d subst	ance		YES		NO
Have you had more than one conviction for any of the view	olation	s described below in any type of	f motor ve	hicle?					
Speeding in excess of 15 mph or more above the posted	speed	limit					YES		NO
 Driving recklessly, as defined by State or local law or reg wanton disregard for the safety of persons or property) 	ulation	(including offenses of driving a mo	tor vehicle	in willfu	l or		YES		NO
Making improper or erratic lane changes							YES		NO
Following the vehicle ahead too closely							YES		NO
Violating State or local law relating to motor vehicle traffic a fatal accident			-				YES		NO
Driving a CMV without obtaining a CDL							YES		NO
• Driving a CMV without a CDL in the driver's possession							YES		NO
 Driving a CMV without the proper class of CDL and/or en passengers or type of cargo being transported 							YES		NO
Violating a State or local law or ordinance on motor vehic	le traffi	c control prohibiting texting while d	riving				YES		NO
Violating a State or local law or ordinance on motor vehic mobile telephone while driving							YES		NO
Have you had any conviction for a violation of military, s (other than parking violation) arising in connection with which you were at fault?	any tra	ffic accident and have no record	d of an aco	cident i		_		_	NO
which you were at fault?							YES		NO
Have you been regularly employed or were you regularly em	ploved	within the past year (12 months) in	a military	position		_		_	
requiring the operation of a military motor vehicle that was re	present	ative of a commercial motor vehicl	e (CMV)?.				YES		NO
Were you exempted from the CDL licensing requirements for driving a military vehicle on state roads and highways in accordance with 49 CFR §383.3 (c)?					YES		NO		
Have you operated a military motor vehicle representative of the commercial motor vehicle (CMV) that you operate or expect to operate, for at least the 2 years immediately preceding discharge from the military?					NO				
I certify under penalty of perjury that the information on this form is true and correct to the best of my knowledge, information and belief.									
APPLICANT'S SIGNATURE			DATE						

COMMA	NDING OFFICER'S CERTIFICATION OF COMMERCIAL D	RIVING EXPERIENCE							
COMMANDING OFFICER'S NAME (LAST, FIRST, MIDDLE)			TELEPHONE NUMBER						
STREET	ADDRESS								
		07.175	70000		0.011	177.1			
CITY		STATE	ZIP CODE	:	COUN	NIY			
SERVICE	MEMBER'S DATE OF QUALIFICATION: FROM		то						
				EXPIRATION DATE (US Gov't Motor Vehicle Operator Identification Card / License)					
				operator identino		u / License	•)		
Circle	the highest class of vehicles the service member I	nas been driving:							
Class	Vehicle Description	EXAMPLE O	F VEHICL	ES IN GROUI	Ρ				
	* 5 th WHEEL - Truck Tractor/Semitrailer								
Α	Any combination of vehicles with a GCWR of								
	26,001 or more pounds provided the GVWR		11						
	of the vehicle(s) being towed is in excess of	0000 000 000	6	000		0	00		
	10,000 pounds.								
	* PINTLE HOOK - Truck Trailer Combination								
Α	Any combination of vehicles with a GCWR of								
	26,001 or more pounds provided the GVWR		E.						
	of the vehicle(s) being towed is in excess of								
	10,000 pounds.								
В	Any single vehicle with a GVWR of 26,001 or								
	more pounds or any such vehicle towing a						L.M.M.N		
	vehicle not in excess of 10,000 pounds GVWR.		00	Ö O	0 4	0	00	5	
	GVWR.								
Thour	hicle the service member operates is equipped wit	h a full air braka system:			п	YES	п	NO	
		-				IEO	Ц	NU	
The vehicle the service member operates is equipped with an air-over-hydraulic braking system:						YES		NO	
The transmission in the vehicle the service member operates is:				AL					
L									

I certify that the service member named on the front of this document is/was assigned in a job/assignment requiring the operation of a commercial motor vehicle, the service member's driving experience has been verified; and the information provided herein is true and correct to my knowledge, information and belief. I also certify that I am an officer of the Armed Forces with the authority to administer oaths; and who has the general powers of a notary public.

PRINT COMMANDING OFFICER'S NAME/RANK	DATE			
SIGNATURE	DATE			

Authority of Article 136, Uniform Code of Military Justice or 10 U.S.C. 1044a