300 Sower Boulevard, Frankfort, Kentucky 40601

(502) 564-4185

http://kcpe.ky.gov

# RENEWAL APPLICATION TO OPERATE A 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 shall be submitted with an application fee in accordance with 791 KAR 1:025. This fee is nonrefundable. 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.485 and 791 KAR 1:025
- 5. This completed application must be submitted to the Kentucky Commission on Proprietary Education by mail to 300 Sower Boulevard, Frankfort, Kentucky 40601. In addition, a complete copy of this application and all supporting materials must be scanned and submitted electronically.

### **SCHOOL INFORMATION**

| School Name  |                                | Date               |          |
|--|--------------------------------|--------------------|----------|
| Street Address   | City                           | State              | Zip Code |
| Telephone Number   | Fax Number                     | Website Address    |          |
| Administrative Contact Person Name   | Title                          |                    |          |
| Administrative Contact Person Address  | City                           | State              | Zip Code |
| Administrative Contact Phone Number  | Fax Number                     | Email Address      |          |
| Since the last renewal, has any administra with a school that closed?                  | tor, owner or officer been ass |                    | No       |
| If Yes, please explain.  |                                |                    |          |
| Since the last renewal, has the school, any to cease and desist operations [by any act | •                              |                    | No       |
| If Yes, please explain and list state(s).  |                                |                    |          |
| Since the last renewal, has the school bee state, or accrediting agency?               | n refused approval by a fede   |                    | No       |
| If Yes, please explain.  |                                |                    |          |
| List names of approvals by all federal ager  | ncies, state agencies and acc  | rediting agencies. |          |
|  |                                |                    |          |
|  |                                |                    |          |
|  |                                |                    |          |



300 Sower Boulevard, Frankfort, Kentucky 40601 (502) 564-4185 <a href="http://kcpe.k">http://kcpe.k</a>

http://kcpe.ky.gov

# RENEWAL APPLICATION TO OPERATE A RESIDENT COMMERCIAL DRIVER LICENSE TRAINING SCHOOL

### **OWNER INFORMATION**

| Type of Ownership Entity  |                |   |                   | 5 ***** <u>-</u> ***** |                 |                       |              |              |
|---|----------------|---|-------------------|------------------------|-----------------|-----------------------|--------------|--------------|
| 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  Street Address City State Zip Code  Has ownership changed since previous application? Yes No  If Yes, please complete APPLICATION TO TRANSFER OWNERSHIP OF A SCHOOL (PE-21).  HOURS OF OPERATION  Monday Tuesday Wednesday Thursday Friday Saturday Sunday  Morning Afternoon Evening STUDENT AND PERSONNEL INFORMATION  Present Enrollment  Total Enrollment  Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License | Type of Own    | ership Entity   | ☐ Corporation     | on                     | d Liability Com | ipany 🗌 Pai           | tnership     | ☐ Individual |
| 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  Has ownership changed since previous application? If Yes, please complete APPLICATION TO TRANSFER OWNERSHIP OF A SCHOOL (PE-21).  HOURS OF OPERATION  Monday Tuesday Wednesday Thursday Friday Saturday Sunday  Morning Afternoon Evening STUDENT AND PERSONNEL INFORMATION  Present Enrollment Total Enrollment Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License   | Name of Owr    | Name of Ownership Entity  Date and State of Incorporate |                   |                        |                 |                       | ncorporation |              |
| Street Address City State Zip Code  School Owner Name Percent of Ownership Telephone Number  Street Address City State Zip Code  Has ownership changed since previous application?  | Street Addres  | ss City State Zip                                       |                   |                        |                 |                       | Zip Code     |              |
| School Owner Name Percent of Ownership Telephone Number  Street Address City State Zip Code  Has ownership changed since previous application?  | School Owne    | r Name  |                   | Percent of             | Ownership       |                       | Teleph       | none Number  |
| Street Address City State Zip Code  Has ownership changed since previous application?   | Street Address | SS  |                   | City                   |                 | Sta                   | te           | Zip Code     |
| Has ownership changed since previous application?   | School Owne    | er Name   |                   | Percent of             | Ownership       |                       | Teleph       | one Number   |
| If Yes, please complete APPLICATION TO TRANSFER OWNERSHIP OF A SCHOOL (PE-21).  HOURS OF OPERATION  Monday Tuesday Wednesday Thursday Friday Saturday Sunday  Morning Afternoon  Evening STUDENT AND PERSONNEL INFORMATION  Present Enrollment  Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License  | Street Address | SS  |                   | City                   |                 | Sta                   | te           | Zip Code     |
| Morning Afternoon Evening  STUDENT AND PERSONNEL INFORMATION  Present Enrollment Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License   |                |   |                   | •                      | OWNERSHIP (     | _                     |              |              |
| Morning  Afternoon  Evening  STUDENT AND PERSONNEL INFORMATION  Present Enrollment  Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License  |                |   | H                 | OURS OF OPE            | ERATION         |                       |              |              |
| Afternoon  Evening  STUDENT AND PERSONNEL INFORMATION  Present Enrollment  Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License   |                | Monday  | Tuesday           | Wednesday              | Thursday        | Friday                | Saturday     | Sunday       |
| STUDENT AND PERSONNEL INFORMATION  Present Enrollment  Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License   | Morning        |   |                   |                        |                 |                       |              |              |
| STUDENT AND PERSONNEL INFORMATION  Present Enrollment  Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License   | Afternoon      |   |                   |                        |                 |                       |              |              |
| Present Enrollment  Total Enrollment from July 1 through June 30 during the immediate past school year  Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License  | Evening        |   |                   |                        |                 |                       |              |              |
| Total Enrollment from July 1 through June 30 during the immediate past school <u>year</u> Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License  |                |   | STUDE             | NT AND PERSO           | ONNEL INFOR     | RMATION               |              |              |
| Number of Graduating Students from July 1 through June 30 during the immediate past school year  Number of Full-Time Instructional Staff who hold CDL Instructor License  | Present Enr    | ollment   |                   |                        |                 |                       |              |              |
| School year  Number of Full-Time Instructional Staff who hold CDL Instructor License  | Total Enrollr  | nent from July  | 1 through Jun     | e 30 during the        | immediate pas   | st school <u>year</u> |              |              |
|   | 1              | Graduating Stu  | idents from Jul   | y 1 through Jun        | e 30 during the | e immediate pas       | st           |              |
| Number of Part-Time Instructional Staff who hold CDL Instructor License   | Number of F    | ull-Time Instr  | uctional Staff w  | ho hold CDL In         | structor Licens | e                     |              |              |
|   | Number of F    | Part-Time Instr   | ructional Staff v | who hold CDL In        | structor Licens | se                    |              |              |

Kentucký

300 Sower Boulevard, Frankfort, Kentucky 40601 (502) 564-4185 <a href="http://kcpe.ky.gov">http://kcpe.ky.gov</a>

# RENEWAL APPLICATION TO OPERATE A RESIDENT COMMERCIAL DRIVER LICENSE TRAINING SCHOOL

### **STUDENT AID**

List all student aid proceeds received for July 1 Through June 30, by program

Dollar Amount

Number of Students

| KEES                                 |               |                    |
|--------------------------------------|---------------|--------------------|
| College Access Program               |               |                    |
| KY Tuition Grant                     |               |                    |
| KY National Guard Tuition Assistance |               |                    |
| Other KY                             |               |                    |
| FEDERAL                              |               |                    |
|                                      | Dollar Amount | Number of Students |
| PELL Grants                          |               |                    |
| Federal Work Study Program           |               |                    |
| Federal Student Loans                |               |                    |

Page 3 of 6

TOTAL STATE AND FEDERAL ASSISTANCE \$\_

Other Federal

PE-32 2017





300 Sower Boulevard, Frankfort, Kentucky 40601 (502) 564-4185 http://kcpe.ky.gov

Length of

Contact/Clock

Number of Students

# RENEWAL APPLICATION TO OPERATE A RESIDENT COMMERCIAL DRIVER LICENSE TRAINING SCHOOL

### **PROGRAM INFORMATION**

Type of Program

List all programs **previously approved** by the Commission:

| Name of Program  | Certificate/ Diploma / Associate Degree | Program          | or<br>Credit Hours  | Completed                |
|--|---|------------------|---------------------|--------------------------|
|  |   |                  |                     |                          |
|  |   |                  |                     |                          |
|  |   |                  |                     |                          |
|  | SUPPORTING                              |                  |                     |                          |
| SCHOOL SURETY BOND number listed or an irrevoca Dollars (\$20,000.00), marke                                     | ble letter of credit at a               |                  |                     |                          |
| ☐ BLANKET AGENT SURETY the bond number listed, in the agent/recruiter soliciting in K                            | e minimum amount of                     | Five Thousa      |                     |                          |
| ☐ APPLICATIONS for RENEW (PE-35) and RENEWAL PER   |   |                  | •                   | nstructor                |
| Student enrollment form, con Exhibit D.  | mplete with the school'                 | s refund poli    | cy as stated in the | e school catalog, marked |
| ☐ FORM FOR INSTRUCTION, instructors and key administr  |   |                  |                     | PE-11) for classroom     |
| ☐ Electronic copies of all stude school since the end of the ir  |   |                  |                     |                          |
| If your school is accredited, agency, marked Exhibit G.  | a copy of the certificate               | or letter of a   | accreditation provi | ded by your accrediting  |
| <ul> <li>Fire inspection report indicated from the local health department</li> <li>marked Exhibit H.</li> </ul> |   |                  |                     |                          |
| <ul> <li>Copy of current liability insu identification numbers (VIN)</li> </ul>                                  |   | a list of all eq | uipment with appr   | opriate vehicle          |
| ☐ Copy of all advertisements c   | urrently published in pr                | int or in broa   | dcast, marked Exl   | hibit J                  |
| ☐ JOB PLACEMENT REPOR  | TING (PE-) marked Exl                   | hibit K          |                     |                          |
| ☐ Copy of Article of Incorporat  | ion and Assumed Nam                     | e paperwork      | marked Exhibit L    |                          |



300 Sower Boulevard, Frankfort, Kentucky 40601

(502) 564-4185

http://kcpe.ky.gov

# RENEWAL APPLICATION TO OPERATE A RESIDENT COMMERCIAL DRIVER LICENSE TRAINING SCHOOL

| ☐ School catalog,    | bulletin,  | brochure, | or other  | publication   | distributed  | to students   | . This   | document    | must be | certified | as true  | and      |
|----------------------|------------|-----------|-----------|---------------|--------------|---------------|----------|-------------|---------|-----------|----------|----------|
| correct in content a | and policy | by the ap | propriate | school office | cial and mus | st contain th | ne follo | owina infor | mation. | marked E  | xhibit K | <u>.</u> |

| Insert<br>Page<br>Number | Catalog Requirements  |
|--------------------------|---|
|                          | Title and date of issue.  |
|                          | Official name of the school, its governing body, officials, and faculty.  |
|                          | Calendar showing legal holidays, beginning and ending dates of when classes are offered and other important dates.  |
|                          | Policy regarding enrollment dates, and specific entrance requirements for each course or program.   |
|                          | Policy regarding attendance, including but not limited to, absences, make-up work, and tardiness.   |
|                          | Policy regarding standards of academic progress required of the student.  |
|                          | Policy regarding withdrawal, dismissal and re-entry.  |
|                          | Policy regarding transcript request.  |
|                          | Detailed schedule of fees, including but not limited to, charges for tuition, books, supplies, tools, student activities, laboratory fees, service charges, rentals, and deposits.  |
|                          | Refund policy as stated in the student enrollment form.   |
|                          | Outline for each program offered listing all courses in the program as well as the contact/clock or credit hours for each course.   |
|                          | Description for each course in a program.   |
|                          | Policy regarding granting credit for previous education, training and experience.   |
|                          | Statement regarding transfer of credits.  |
|                          | Policy for Students regarding the process for filing a complaint with the Kentucky Commission on Proprietary Education Policy for Students regarding the process for filing a claim against the Student Protection Fund and a statement notifying students of the existence of the Fund (included on the Student Enrollment Agreement). |



300 Sower Boulevard, Frankfort, Kentucky 40601 (502) 564-4185 http://kcpe.ky.gov

# RENEWAL APPLICATION TO OPERATE A RESIDENT COMMERCIAL DRIVER LICENSE TRAINING SCHOOL

### **ANNUAL RENEWAL LICENSE FEES**

Annual renewal license fee for Resident Commercial Driver License Training Schools shall be based on "Gross Revenue." Gross Revenue shall mean the total amount of tuition earned by a School for all courses or training less any tuition refunds paid to students during the immediate past school year, July 1 through June 30

All agent permit fees and CDL skills Instructor permits are submitted annually. An application must be completed for each agent/instructo/recruiter. There is no proration of any fees and all fees are non-refundable.

This school has computed the enclosed annual renewal license fee in the amount listed below in accordance with 791 KAR 1:025

|   | Amount |
|---|--------|
| Total Revenue - total tuition earned from July 1 through June 30 from the immediate past school year  |        |
| Less Tuition Refunds Paid to Students from July 1 through June 30   |        |
| Gross Revenue from July 1 through June 30   |        |
| TOTAL ANNUAL RENEWAL LICENSE FEE  |        |
| CERTIFICATION   |        |
| I certify that the information provided on this application as submitted to the Kel<br>Education is true and correct in its entirety. In addition, I hereby pledge to fo<br>Chapter 165A and all rules and regulations set out in 791 KAR Chapter 1 |        |

| School Official Name               | Title | School Official Signature | Date |
|------------------------------------|-------|---------------------------|------|
| State Of                           |       | Affix notary stamp here   |      |
| County Of                          |       |                           |      |
| Signed and sworn before me on this | day   |                           |      |
| of, 20                             |       |                           |      |
|                                    |       | My commission expires:    |      |



**Notary Signature**