

**APPLICATION FOR OHIO PRE-SERVICE SCHOOL BUS DRIVER TRAINING CERTIFICATION**

INFORMATION MUST BE SUBMITTED THROUGH ODE'S WEB-BASED REPORTING SYSTEM IN ORDER TO BE VALID.  
SUBMISSION OF THIS REPORT WITHOUT REQUIRED SUPPORTING DOCUMENTATION ON FILE CONSTITUTES FALSIFICATION.

I. Driver's Name: \_\_\_\_\_ District/Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Zip \_\_\_\_\_

I have completed the required training pursuant to Ohio revised and administrative codes as required by the Ohio Department of Education.

CDL No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ Signature of Driver \_\_\_\_\_ Date \_\_\_\_\_

**II. NEW DRIVER REQUIREMENTS**

To be completed by the OBI for new drivers, or those whose employment has been interrupted for a period of six or more years, or for a driver with an expired Pre-Service certificate.

- \_\_\_/\_\_\_/\_\_\_ 1. Classroom hours with Ohio Pre-Service School Bus Driver Training Instructor were attended at: \_\_\_\_\_ in the county of: \_\_\_\_\_ (Pre-Service class valid for 12 months from date of last day of class)
- \_\_\_/\_\_\_/\_\_\_ 2. On-The-Bus Instruction and Driving Evaluation administered by certified O.B.I. or Pre-Service Instructor
- OBI Pre-Trip Score: \_\_\_\_\_ OBI Driving Evaluation Score: \_\_\_\_\_
- OBI Signature \_\_\_\_\_
- \_\_\_/\_\_\_/\_\_\_ 3. Issue Date of Commercial Driver's License from deputy registrar
- \_\_\_/\_\_\_/\_\_\_ 4. In accordance with OAC 3301-83-10(A)(8), the Applicant was issued a Temporary 45-day Certificate. As noted in Item 1, the classroom portion of training was not completed prior to items 2 and 3.

**III. RECERTIFICATION REQUIREMENTS**

To be completed by the OBI for re-certifying drivers, or those whose employment has been interrupted for a period of more than two years, but less than six years, and hold a current Pre-Service certificate.

- \_\_\_/\_\_\_/\_\_\_ 1. Classroom hours with Ohio Pre-Service School Bus Driver Training Instructor were attended at: \_\_\_\_\_ in the county of: \_\_\_\_\_ (Recent class valid for 12 months from date of last day of class)
- \_\_\_/\_\_\_/\_\_\_ 2. Attended all sessions of the Ohio Advanced School Bus Driver Training Program (24 months prior to expiration of certificate)
- \_\_\_/\_\_\_/\_\_\_ 3. On-The-Bus Instruction and Driving Evaluation administered by certified O.B.I. or Pre-Service Instructor
- OBI Pre-Trip Score: \_\_\_\_\_ OBI Driving Evaluation Score \_\_\_\_\_
- OBI Signature \_\_\_\_\_
- \_\_\_/\_\_\_/\_\_\_ 4. Completed in a Regional or State School Bus Safety ROAD-E-O and scored 80% of the total possible points. (24 months prior to expiration of certificate).
- ROAD-E-O Score \_\_\_\_\_ Regional/State \_\_\_\_\_ Year \_\_\_\_\_

**IV. To be completed by the transportation administrator.** In addition to the above requirements, the items listed below must be completed in accordance with Ohio Revised and Administrative Codes. Copies of the following documents are required to be on file at the bus owner's facility for a period of 6 years.

- 1. Satisfactory T-8 School Bus Driver Physical Examination.
- 2. Completed and received satisfactory BCI&I and FBI background checks
- 3. Satisfactory semi-annual BMV Driver Record Check
- 4. Satisfactory Drug-Alcohol test results and FMCSA Check Form
- 5. FMCSA Drug & Alcohol Clearinghouse Check
- 6. School Bus Driver training records
- 7. Evidence of training related to Drugs and Alcohol
- 8. Evidence of training related to Blood-borne Pathogens
- 9. In-service training records and Annual Driving Certificate

\_\_\_\_\_  
**Transportation Administrator's Signature**

\_\_\_\_\_  
**Date**

\*It is recommended to check Office of Professional Conduct for any case against employee at <https://casemgmt.education.ohio.gov/case/edu-conduct/public-search>

**TO BE COMPLETED BY THE ON-BUS INSTRUCTOR**

To achieve an acceptable level of competence, a **minimum of twelve (12) hours or more**, of on-bus instruction is required and shall be completed prior to a driver being assigned to operate a school bus with pupils on board. The trainee has been trained in all skill area indicated. (\*Indicates areas required for six-year recertification). All area are required for new trainees. Enter the corresponding item number of the training skill performed and the appropriate date it was performed. **Multiple entries per date are allowed but time MUST be in minutes and cannot exceed 160 minutes.**

- \_\_\_ 1. \*Pre-Trip/Post Inspection (Range)
- \_\_\_ 2. \*Mirrors/Seat/Seatbelt Adjustments
- \_\_\_ 3. \*Starting the Engine
- \_\_\_ 4. \*Bus: (A) Conventional; (B) Transit; (C) Van Conversion
- \_\_\_ 5. \*Transmission: (A) Automatic; (B) Standard
- \_\_\_ 6. CDL Off-Road Skills (Range)
- \_\_\_ 7. \*Starting into Traffic & Pulling to the Curb
- \_\_\_ 8. \*Intersections — Stop & Through
- \_\_\_ 9. \*Turns — Left & Right
- \_\_\_ 10. \*Curves
- \_\_\_ 11. \*Lane Changes & Passing
- \_\_\_ 12. \*Driving Environment: (A) Rural; (B) City; (C) Residential
- \_\_\_ 13. Freeway Driving
- \_\_\_ 14. \*Roadside Stop/Start (up-down-flat roadways)
- \_\_\_ 15. \*General Driving Behavior
- \_\_\_ 16. \*Railroad Crossings
- \_\_\_ 17. \*Student Loading & Unloading
- \_\_\_ 18. \*Turn-Arounds
- \_\_\_ 19. Driving with a Detailed Route Sheet
- \_\_\_ 20. \*Weather Conditions (snow-ice-rain-fog-wind-sun)
- \_\_\_ 21. Miscellaneous Items:
  - A.) Drive-up/Downgrade
  - B.) Night Operations
  - C.) Non-routine/Field Trips
  - D.) Off-Road Recovery
  - E.) Route Observation with Experienced Driver
- \_\_\_ 22. Procedures in Breakdown or Accident
- \_\_\_ 23. Evacuation Procedures in Breakdown, Accident, Disability of Driver, Severe Weather Conditions and Tornado
- \_\_\_ 24. Use of Safety Equipment (fusees, fire extinguisher, reflectors first aid & body fluids kit)
- \_\_\_ 25. Pupil Management & School District Policies
- \_\_\_ 26. Other Skills
  - A.) Wheelchair Tie-downs
  - B.) Passenger Restraint Systems, etc.
  - C.) Local Procedures, etc.
- \_\_\_ 27. \*OBI Pre-Trip Evaluation Score \_\_\_\_\_
- \_\_\_ 28. \*OBI Driving Evaluation Score \_\_\_\_\_

| Date         | Areas Covered By # | Minutes |
|--------------|--------------------|---------|
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
|              |                    |         |
| <b>TOTAL</b> |                    |         |

ELDT ONLY  
 BTW HOURS  
 Range (#1 & #6) \_\_\_\_\_  
 Public Road \_\_\_\_\_

Number of times that a Trainee practiced (Minimum of 10 each)

\_\_\_ Student Loading Right      \_\_\_ Student Unloading Right  
 \_\_\_ Student Loading Left      \_\_\_ Student Unloading Left  
 \_\_\_ Railroad Crossing Procedures      \_\_\_ School Bus Turn-Around

I certify that I have conducted the required training in accordance with Ohio Revised Code, Ohio Administrative Code and Ohio Pre-service School Bus Driver Training Manual. I have found the Trainee to be competent to operate a school bus.

OBI Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**FOR NEW DRIVERS ONLY. THIS SECTION IS COMPLETED AFTER THE ISSUANCE OF THE PRESERVICE CERTIFICATE. New Drivers must complete the following:**

Route observation with an experienced driver and students on board \_\_\_\_\_ Drive a route with an experienced driver and students on board \_\_\_\_\_

\_\_\_\_\_  
 Transportation Administrator Signature      Date      Signature of Observing Driver      Date