**Section 252.APPENDIX A Driver Education − Commercial Driver Training School Contract Reporting Form**

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| 100 North First Street, E-320  Springfield, Illinois 62777-0001 |  | **DRIVER EDUCATION − COMMERCIAL DRIVER TRAINING SCHOOL CONTRACT REPORTING FORM** |

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| **FUNDING AND DISBURSEMENTS DIVISION** | | | | | |
| 1. REGION, COUNTY, DISTRICT, TYPE CODE | | | 8. IL SEC OF STATE LICENSED COMMERCIAL  € School Classroom Only  € Behind-the-Wheel Only  € Both | | |
| 2. DISTRICT NAME | | |
| 3. DISTRICT ADDRESS (Street, City, State, Zip Code) | | | 9. NAME OF COMMERCIAL DRIVER TRAINING SCHOOL | | ISOS LICENSE NUMBER |
| 4. SCHOOL YEAR  € New € Renewal | | | 10. TRAINING SCHOOL ADDRESS (Street, City, State, Zip Code) | | |
| 5. CONTRACT DATE WITH COMMERCIAL  DRIVER TRAINING SCHOOL (mm/dd/yyyy) | / | / | 11. NAME OF COMMERCIAL DRIVER TRAINING SCHOOL INSTRUCTOR | | |
| 6. PUBLIC HEARING DATE (mm/dd/yyyy) | / | / | 12. ISBE ILLINOIS EDUCATOR IDENTIFICATION NUMBER | | |
| 7. DISTRICT WEBSITE ADDRESS | | | 13. DATE OF BIRTH (mm/dd/yyyy) | 14. DRIVER LICENSE NUMBER | |

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| Name of District Superintendent (Print or Type) | |  | Date | |
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| ***Original*** Signature of District Superintendent | | |

(Source: Added at 42 Ill. Reg. 8946, effective May 16, 2018)