

TUSCALOOSA COUNTY SCHOOL SYSTEM

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Become a Bus Driver or Bus Aide TODAY!

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Benefits – Positions available IMMEDIATELY

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Contact Us: 205-342-2636 or transportation@tcss.net



REQUIREMENTS TO DRIVE A SCHOOL BUS IN ALABAMA

HOW TO GET CERTIFIED TO DRIVE AN ALABAMA PUBLIC SCHOOL BUS



Anyone twenty-one years old or older wishing to drive a school bus in the state of Alabama must obtain a Commercial Driver License (CDL) issued by the Alabama Law Enforcement Agency (ALEA), formerly the Department of Public Safety (DPS), and certification to drive an Alabama school bus through the Alabama State Department of Education (ALSDE).

HOW TO GET A CDL

In order to receive a CDL to drive a school bus, a prospective school bus driver must secure a Commercial Learner License/Permit. This permit can be secured from any CDL office in Alabama. The permit is given to drivers who do not currently hold a CDL, need to upgrade their CDL, or need to add passenger (P) and/or school bus (S) endorsements. In order to be issued this permit, prospective school bus drivers must pass four written CDL tests at the CDL office. These tests include General Knowledge, Air Brakes, Transporting Passengers, and School Buses.

Study materials for these four tests can be found in the Alabama Commercial Driver License Manual. This manual can be secured from any local driver license office or any CDL office or online at: www.dps.alabama.gov. In preparation for the four tests noted above, the prospective driver should study sections 1-5 and section 10 in the CDL manual. There is a fee for taking the written tests, however there is no fee for performance testing. Upon passing these written tests, the prospective driver will be issued Commercial Learner License/Permit. **The prospective driver must bring this permit to the ALSDE New School Bus Driver Certification Class.**

HOW TO OBTAIN CERTIFICATION TO DRIVE AN ALABAMA PUBLIC SCHOOL BUS

In order to receive certification to drive an Alabama public school bus, a prospective school bus driver must meet the following requirements:

1. Pass a background check and register in AIM, then complete an Alabama School Bus Driver Certificate application via the AIM online portal: www.alsde.edu, then click on Pupil Transportation Certification portal and wait for supervisor approval.
2. Receive a minimum of 4 hours of training from local school system transportation officials before enrollment in the ALSDE School Bus Driver Certification Class. Only drivers who receive this training and produce a properly signed training certification form will be scheduled for performance testing.
3. Attend a 12-hour ALSDE New School Bus Driver Certification Class taught over a period of three days. Normally, a portion of a fourth day is required for performance testing.
4. Score at least 80% on a written test given at the conclusion of the three-day class.
5. Pass a three-part performance test including:
 - (A) Pre-trip inspection of a school bus.
 - (B) Basic Control Skills Tests. These are straight-backing, off-set backing, and alley docking.
 - (C) On-the-road Driving Skills Test with at least 80% mastery.

In order to enroll in an ALSDE class and be performance tested, all prospective drivers must be assigned to the ALSDE new driver class by a local school system transportation supervisor on AIM. **All CDL performance testing for public school bus drivers is done by the ALSDE.**

HOW TO KEEP YOUR ALABAMA SCHOOL BUS DRIVER CERTIFICATION

In order to maintain their school bus driver certification, school bus drivers are required to participate in a 4-hour recertification class. These classes are scheduled in all school systems and are taught between January 1 and November 15 annually. **All bus driver certificates expire annually on December 31.** Drivers who have attended a recertification class are issued are certified for the next calendar year. Drivers who fail to attend a recertification class must repeat the new driver training. An Alabama school bus driver may have his/her Alabama School Bus Driver Certification suspended and/or revoked when there is a danger to the public safety or welfare of school children or when the certification holder has been guilty of immoral conduct or unbecoming or indecent behavior. This includes, but is not limited to, confirmed improper drug use, criminal convictions, failure to use the driver seat belt, unsafe driving history, inability to pass or maintain a current *Alabama School Bus Driver Physical Examination Report*, being uninsurable, or other just cause as determined by the state superintendent of education.

WHO TO CONTACT:

Anyone wishing to drive a school bus in Alabama should contact the local system transportation supervisor. A listing of these supervisors can be found at www.alsde.edu under "Offices/Office of Supporting Programs" or by contacting the Alabama Department of Education, Pupil Transportation Section at 334-242-9730.



Alabama State Department of Education Educator Certification Section

Subject: New Background Guidelines and Erin's Law Mandatory Training Certificate

1. Alabama State Department of Education Background clearance based on a fingerprint review through Fieldprint. (Additional instructions attached.)

You will need the following to be able to complete the registration process successfully:

- A computer, tablet, or smartphone with Internet access
- A valid email account
- Established AIM account
- ALSDE ID#
- Fee of \$46.20 paid by Debit card, credit card, or PayPal Account (Prepaid debit cards or credit cards are acceptable)
- Ability to provide their commonly known personal information (SSN, DOB, DL#, Height, Weight, etc.)

Be sure to follow the **required sequence below**. If you do not, you will not be able to complete the process successfully.

Step 1: Create an AIM Account <https://aim.alsde.edu>

Step 2: Complete Background Check Registration in AIM

Step 3: Create Fieldprint Account

Step 4: Complete authorization forms, schedule appointment, and fee payment

Step 5: Report for fingerprint appointment

2. Erin's Law Mandatory Training Certificate (See Instructions attached)

All employment recommendations are conditional upon Board approval and a favorable fingerprint clearance.

This document is intended to provide basic information and will be updated as needed.



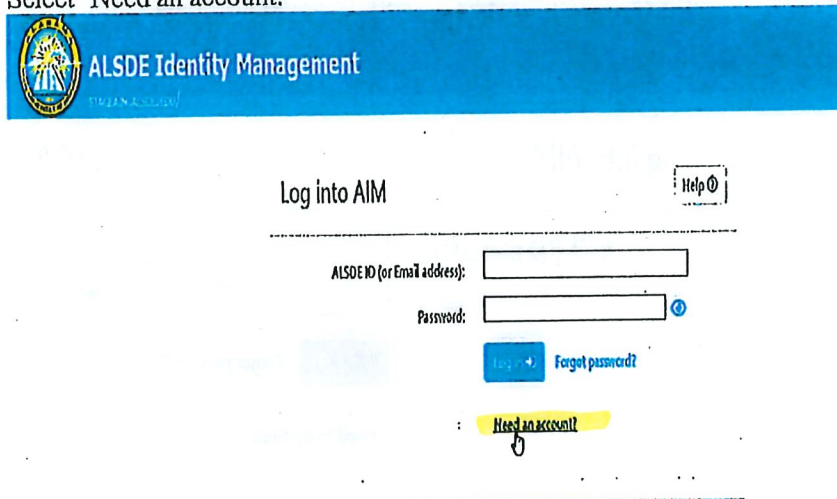
**Alabama State Department of Education
Educator Certification Section**

**Creating an
AIM Account**

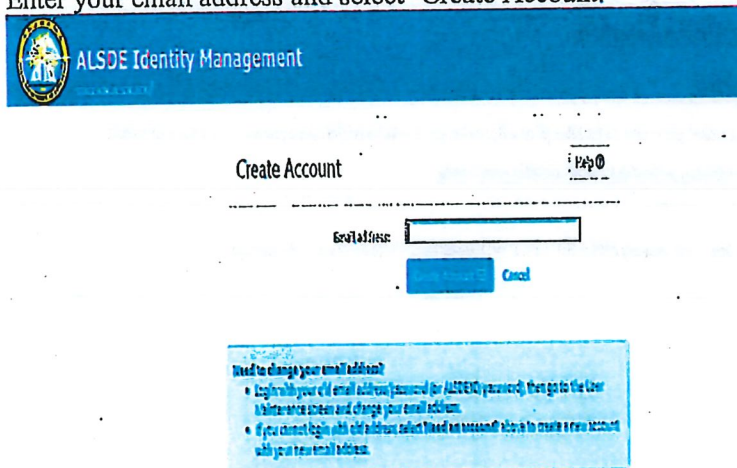
This document is intended to provide basic information and will be updated as needed.

Creating an AIM account

1. Visit <https://aim.alsde.edu>.
2. Select 'Need an account.'



3. Enter your email address and select 'Create Account.'



4. AIM will send an email to the address provided; go to your email and click the link.

Email sent!

We sent an email to coreyworkalsde@gmail.com; check and follow instructions.

Log into AIM

Help ?

ALSDE ID (or Email address):

Password:



Log in →

[Forgot password?](#)

[Need an account?](#)



ALSDE AIM - do not reply - ain@alsde.edu
to me ▾

7:10 AM (9 minutes ago) ☆ ↶ |

Confirm Account Creation

This address coreyworkalsde@gmail.com recently requested to create an ALSDE AIM account. If you did not initiate this account creation, please delete and ignore this message.

If you want to create an account, please open the link below (or cut and paste into your favorite browser) to confirm your ownership of this email account.

<https://alsde.aims.edu/index.aspx?it=5454-455-5452-4553-4554>

This email was sent from a notification-only address that cannot accept incoming email. Please do not reply to this message.

5. Provide required details in the Create Account page and select 'Create Account.'

Note: Be sure to follow password requirements.

Create Account

Help

Please enter your name as indicated on government issued identification.

Email address: [redacted]@gmail.com
Title: Mr.
Legal first name: BGR
Legal middle name: [redacted] Optional
Maiden name: [redacted] Optional
Legal last name: Smith
Suffix: [redacted]

Your password must:
• be between eight and sixteen characters in length,
• contain at least one number,
• contain at least one uppercase letter,
• contain at least one lowercase letter,
• contain at least one special character, and
• match the verification password.

Password: [redacted]
Verify Password: [redacted]
Create Account Cancel

6. Select security questions and answers and select 'Save answers.'
- Note: Remember your answers. They will be needed if you ever need to recover your account.

Security Questions

Please select one question from each of the provided list and supply an answer that only you would provide for that question. Should you forget your password or lock your account, we will ask you these questions. For your protection, you must answer these questions correctly before your password may be reset or your account unlocked.

Question 1
Select Question:
What city did you meet your spouse?
Answer: [redacted]

Question 2
Select Question:
What is the name of your first pet?
Answer: [redacted]

Question 3
Select Question:
What is your favorite color?
Answer: [redacted]

Save Answers

File Print Refresh
03/20/2023 10:10:23 AM

7. Acknowledge restrictions, agree to the terms of usage, and select 'Yes, continue.'

AIM Use and Restrictions

☒ I acknowledge the restrictions.
☒ I agree to the terms of usage.

Yes, continue No, do not continue

8. Enter information on Demographics page and select 'Save demographics.'

Demographics

The following information is required for assignment in the Education Directory. This information is used to properly update teaching certificates and bonds.

Please review and/or provide the required information below. If the correct SSN/DOB is not entered, it will delay your registration/access and/or certification process.

SSN:

Sex:

Date of birth: Month: Day: Year:

Work phone:

Application Guide

Log into your AIM Account

After you have successfully logged into AIM, your home page may look something like this.

Click the 'Pupil Transportation' Tile:

AIM: ALSDE Identity Management

Navigation Bar:

- ALSDE Leave Form
- Certification Search
- School Bus Accident Analysis
- Transportation Bus Route
- Transportation Files
- Transportation Plan
- Pupil Transportation Certification**

Status Bar: User logged in as User on 3/20/2023 11:52 AM

Application Guide

2. Applicants

After you successfully updated your AIM profile and clicked on the "Pupil Trans" Tile, you will be taken a page that looks like this below:

To start a new application: Point to Application and click NEW

Application Guide

Personal Info and Contact Info on the application are prefilled from AIM profile. If you need to update any of those fields you can click on the link in the SSN statement as shown below. This will take you to the AIM User Profile Screen.

New

Personal Info

Applicant Name:

Address Line 1: Address Line 2:

City: County: State: Zip-5: Zip-4:

Drug Test Results

Add Drug Test	Negative Results	Date Created
No data to display		

Contact Info

Home Phone #: Call Phone #: Work Phone #:

Email Address:

Driver Info

SSN Statement: Collection of your social security number (SSN) is required for the purpose of your personal background report. If incorrect, please update by editing your demographic details [here](#).

D/L #: State: Expiration Date:

Physical Date: Physical Expiration Date:

Fill in Driver Info and Personal Background Report then Click Submit on the bottom of the application:

What may keep you from performing the duties of a school bus driver? ☐ YES ☐ NO

6. Have you ever been denied automobile insurance? ☐ YES ☐ NO

7. Do you have any physical, mental, or medical conditions that that would interfere with you performing the duties of a school bus driver? (diabetes, epilepsy, congestive heart failure, high blood pressure, paralysis, loss of limb, etc.) ☐ YES ☐ NO

8. Have you had any type of vehicle accident in the past five years? ☐ YES ☐ NO

9. Has your driver license ever been suspended, removed, or revoked? ☐ YES ☐ NO

has been guilty of immoral conduct or unbecoming, or indecent behavior. This includes, but is not limited to, confirmed improper drug use, criminal convictions, failure to use the driver seat belt, unsafe driving, being/becoming uninsurable, or other just cause. If an Alabama certified school bus driver fails and/or refuses to drive for a local school system, the local transportation supervisor may place the driver on Inactive Status. Once placed on the Inactive list, the driver will be removed from the random drug testing list. An Inactive status may be changed back to "Active" when the driver passes a pre-employment drug test, is placed on the drug and alcohol random drug tests, and is retrained by the local school system school bus driver trainer. An Inactive status does not nullify a driver's certification as long as the driver recertifies each calendar year.

Submit

Time to process pages: 2.76 seconds

Application Guide

Click I Accept to finish the submitting process:

Applicant Authorization

AUTHORIZATION:
 I understand that my completion of this application is necessary in order to obtain certification to drive an Alabama school bus and that my potential employment as a school bus driver rests solely with the above-named school system or other Alabama school system where I may apply. Under penalty of prosecution and dismissal, I hereby certify that the information presented is true, accurate, and complete. I understand that misrepresentation or omission of pertinent facts may be caused for denial, revocation, or suspension of my Alabama School Bus Driver Certification, denial of employment, or termination of employment. Further, I authorize the investigation of all statements contained herein and understand that any document relevant to this investigation may be reviewed by the agents of above-named school system or the Alabama Department of Education.

SSN Statement: Collection of your social security number (SSN) is required for the purpose of your personal

You will see a confirmation window:

Personal Info

Applicant Name: Certification Supervisor, Transportation

Address Line 1: Address Line 2:

City: County: State: Zip-5: Zip-4:

Driving Test Results

Contact Info

Home Phone #: 3343338672

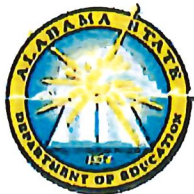
Email Address: don.larier@transcertusa.com

Work Phone #:

Driver Info

* When AIM registration is complete the applicant will be taken to their home page. Select **Fieldprint Background Check** to start registration for a background check. Note: Be sure to make note of your **ALSDE ID#**. This will be needed to complete registration with Fieldprint.





**Alabama State Department of Education
Educator Certification Section**

**Registering for a Criminal History
Background Check with Fieldprint**

Applicants will need:

- A computer, tablet, or smartphone with internet access
- A valid email account
- Established AIM account
- ALSDE ID#
- Fee of \$46.20 paid by debit card, credit card, or PayPal account (prepaid debit card or credit cards are acceptable)
- Ability to provide commonly known personal information (SSN, DOB, DL#, Height, Weight, etc.)

Be sure your applicants follow the required sequence below. If they do not, they will not be able to complete the process successfully.

Step 1: Create an AIM Account

Step 2: Complete Background Check Registration in AIM

Step 3: Create Fieldprint Account

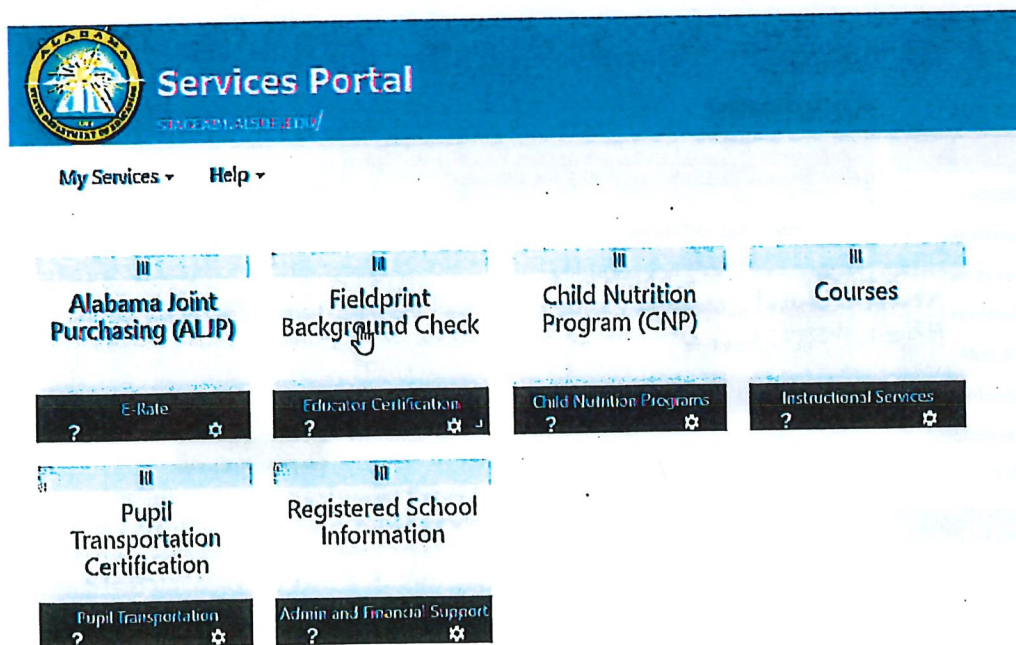
Step 4: Complete authorization forms, schedule appointment, and fee payment

Step 5: Report for fingerprint appointment

1. Start by visiting our ALSDE Identity Management website at <https://aim.alsde.edu> and select "Need an account?." Follow the prompts to complete your AIM account.
Note: Existing AIM users should simply log into AIM by entering their ALSDE ID# or Email address and Password.

The screenshot shows the ALSDE Identity Management website. The header is blue with the ALSDE logo and the text "ALSDE Identity Management". Below the header, the main content area is white. It features a "Log into AIM" section with two input fields: "ALSDE ID (or Email address):" and "Password:". Below the password field is a "Forgot password?" link. At the bottom of the login section is a "Need an account?" link. A blue box with white text provides instructions for users who need to change their email address: "Need to change your email address? • Login with your old email address/password (or ALSDE ID/password), then go to the User Maintenance screen and change your email address. • If you cannot login with old address, select Need an account? above to". The browser's address bar shows "https://aim.alsde.edu".

2. After AIM account is created, log in to AIM and select the 'Fieldprint Background Check' tile as shown below.



2.1 Press 'Set' button under Educator certification and Criminal history Background checks

AIM Demographics

The following information is required for accessing various ALSDE applications, for assignment in the Education Directory, to properly update teaching certificates and bonds, and for background checks.

You must select an account type.

Please provide accurate and complete information. Required sections are indicated by an asterisk (*) to the right of the section name.

Account Type

These data fields are required in order to build a profile with Educator Certification. It is the individual's responsibility to provide accurate information and to keep all information current.

	Educator Certification and Criminal History Background Checks	Researcher	Public
Select this option if you:	<ul style="list-style-type: none"> are applying for an Alabama certificate, license, or permit, are attempting to complete a criminal history background check, or are updating personal information with Educator Certification. 	<ul style="list-style-type: none"> need access to public data applications, or are accessing data through a memorandum of understanding (MOU) with ALSDE. 	<ul style="list-style-type: none"> need access to public data applications.
	<input type="button" value="Set"/>	<input type="button" value="Set"/>	<input type="button" value="Set"/>

Note: It is the applicant's responsibility to provide accurate information. Failing to do so may result in a significant delays of the background check review. The user will need to keep up with the ALSDE ID# assigned in AIM. That number will be referenced when attempting to schedule an appointment with Fieldprint.

2.2 Enter Race and Ethnicity details and select 'Save' and then 'Continue to Citizenship.'

Race and Ethnicity

These data fields are required in order to build a profile with Educator Certification. It is the individual's responsibility to provide accurate information and to keep all information current.

Race: Field is required.

Ethnicity: Field is required.

[Return to previous page](#)

2.3 Enter Citizenship details and select 'Save' and then 'Continue to Phone Numbers.'

The screenshot shows a web form titled "Citizenship". On the left is a sidebar menu with options: Account Type, Ethnicity/Race, Citizenship (highlighted), Phone Numbers, Home Address, Characteristics, Birth Details, Background Check, State Identification, and RSA ID. Below the menu is a green "Continue" button. The main content area has a blue header "Citizenship" and a light blue informational box stating: "These data fields are required in order to build a profile with Educator Certification. It is the individual's responsibility to provide accurate information and to keep all information current." Below this is a question "Are you a legal United States citizen?" with a dropdown menu showing "Yes" and a "Field is required." message. A blue "Save" button is positioned below the question. At the bottom right of the form is a green button labeled "Continue to Phone Numbers".

2.4 Enter Phone Number details and select 'Continue to Home Address.' Note: At least one phone number is required for registration.

The screenshot shows a web form titled "Phone Numbers". The sidebar menu on the left is identical to the previous form, but "Phone Numbers" is highlighted. Below the menu is a green "Continue" button. The main content area has a blue header "Phone Numbers" and the same light blue informational box. Below the box is a table with three rows: "Home", "Work", and "Cell". Each row has a text input field for the phone number and two buttons: a blue "Save" button and a red "Delete" button. The "Work" row contains the number "334.123.4567" and the "Cell" row contains "334.312.1669". At the bottom right of the form is a green button labeled "Continue to Home Address".

2.7 Enter Birth Details and select 'Save' and then 'Continue to Background Details.'

Account Type

Ethnicity/Race

Citizenship

Phone Numbers

Home Address

Characteristics

BIRTH

Background Check

State Identification

RSA ID

Continue

Birth Details

Country

State

Save

United States of America

Field is required.

Alabama

Field is required.

Continue to Background Details

Time to process page
API Version

Background Check

These data fields are required in order to build a profile with Educator Certification. It is the individual's responsibility to provide accurate information and to keep all information current.

Scenario

1. You are applying for a Professional Educator Certificate, a Professional Leadership Certificate, Alternative Certificate, Career and Technical Certificate, or an Emergency Certificate.
Educator Certification
Authority: Ala. Code 16-22A-5(d) (1975)
2. **You already hold a certification or license as an educator, school bus driver,** substitute, or in Professional Leadership, and are seeking public employment in a new local public school system (including public charter schools).
Certified or Licensed Applicant for Public Employment
Authority: Ala. Code 16-22A-5(a) and (d) (1975)
3. You are applying for a Substitute Teacher Licensure.
Substitute Teacher Licensure
Authority: Ala. Code 16-22A-5(d) (1975)
4. You are seeking employment at a public or private school in a position that does not require you to hold any license or certification. Examples include but are not limited to the following: secretary, instructional aide, custodian, lunchroom worker, **bus aide**, contractor, etc. This includes non-certified and non-licensed applicants for employment at public charter schools.
Non-Certified or Non-Licensed Applicant for Public or Nonpublic Employment
Authority: Ala. Code 16-22A-5(a), (b), and (d) (1975)
5. **You are applying for a School Bus Driver Certificate.**
School Bus Driver Certification
Authority: Ala. Code 16-22A-5(d) (1975)
6. You attend an Alabama College or University and are seeking admission to an Educator Preparation Program. If you are enrolled in an Educator Preparation Program outside of Alabama, please do not continue this process. Contact the Alabama State Department of Education, Office of Educator Certification, for more information at (334) 694-4557.
Educator Preparation Program
Authority: Ala. Code § 16-23-16.2 (1975)

*****Please read the following:*****

For new **Bus Drivers** you need to **Pick 5.**

For **Bus Aides** you need to **Pick 4.**

For **Bus Driver** coming from another system **Pick 2.**

2.8.b Applicant selects School System/IHE/Nonpublic school with which they are affiliated.

Note: Type the name of the LEA/Institution/Nonpublic school or engage the drop down arrow to see an alphabetical listing.

Site

- Albion State University (Albion, AL)
- Almore Christian School (Almore, AL)
- Almore Work Release (None Supplied, AL)
- Attalla City (Attalla, AL)
- Auburn City (Auburn, AL)
- Auburn Classical Academy, Inc. (Auburn, AL)
- Auburn Classical Academy, Inc. (Opelika, AL)
- Auburn Montessori School - The Children's House (Auburn, AL)
- Auburn University (Auburn Univ, AL)
- Auburn University At Montgomery (Montgomery, AL)
- Autauga Academy (Prattville, AL)
- Autauga County (Prattville, AL)
- AWAKE Community School (Birmingham, AL)
- Azalea City Christian (Semmes, AL)
- Baldwin County (Bay Minette, AL)

2.8.c Applicant answers questions regarding convictions and then selects 'Save' and

'Continue to State Identification.' **Note:** If the applicants selects 'Yes' a pop-up message will be displayed informing the applicant to send additional information to the ALSDE. A 'Yes' response does not prevent the applicant from completing registration.

Have you ever been convicted of or entered a plea of no contest to a felony or misdemeanor other than a minor traffic violation?

☒ Yes ☐ No

Before your suitability status can be determined, the Certification Office will need additional information. Please mail **OR** email the following information to the ALSDE Certification Office. Be sure to include your ALSDE ID# along with any information you send.

1. A copy of the case action summaries showing the judgments, convictions, and sentencing or other outcome of your cases.
2. A notarized personal explanation regarding the circumstances surrounding your cases. You should include the dates involved, the places of conviction, final outcome, and any other factors that should be considered.

ALSDE Certification Office Mail address:

PO Box 302701

Montgomery, AL 36130-2101

BGR@alsde.edu

Field is required.



2.9 Enter State Identification details and select 'Save' and 'Continue to RSA ID.'

State Identification / Driver License

These data fields are required in order to build a profile with Educator Certification. It is the individual's responsibility to provide accurate information and to keep all information current.

Type: Driver License
Field is required.

State: Al: Alabama
Field is required.

Number: 123456
Field is required.

Expiration Date: 3/31/2023
Field is required.

[Continue to RSA ID](#)

2.10 Enter RSA ID details and select continue. Note: RSA ID number is optional. If you do not have, or do not know your RSA ID number simply select 'No' and 'Continue' to complete your AIM registration. Note: The user will be immediately transferred to the Fieldprint Welcome screen.

RSA ID

These data fields are required in order to build a profile with Educator Certification. It is the individual's responsibility to provide accurate information and to keep all information current.

Do you have a RSA ID?
Yes No

[Continue to RSA ID](#)

3. Select 'Sign Up' to begin. Note: The applicant has been transitioned to Fieldprint.

fieldprint [Contact Us](#)

Welcome to Fieldprint®

Sign Up
For new users, please select 'Sign Up' below to schedule a fingerprinting appointment.

Returning User Login
For existing users, please select 'Login' below to check appointment status, view and print receipts or reschedule an existing appointment.

[Sign Up](#) [Login](#)

3.1 User will review Fieldprint Authorization form and select 'I Agree.'

3. Withdrawal of Consent to Electronic Signatures & Electronic Disclosures

You may withdraw your consent to use electronic signatures or to receive electronic disclosures at any time by contacting us via email at customerservice@fieldprint.com. Any withdrawal of your consent to receive electronic disclosures or to use electronic signatures will be effective only after we have a reasonable period of time to process your withdrawal. However, withdrawing your consent to this Consent Agreement will terminate your ability to provide electronic signatures and to receive disclosures and other documents electronically. Continuing to provide electronic signatures after withdrawing consent is reaffirmation of your consent to the use of electronic signatures under the E-SIGN Act.

4. You Must Keep Your Contact Information Current

In order for us to be able to provide you with important notices and other information from time to time, you must ensure that the contact information in your online profile is current. This includes, but is not limited to, name, address, phone number, and email or other electronic addresses. In order to update your information, contact us via email at customerservice@fieldprint.com.

5. Hardware and Software You Will Need

To use our online processes, you will need Internet Browser software that supports at least 128-bit encryption, a current version of a program that accurately reads and displays PDF files (such as Adobe Acrobat Reader), a printer if you wish to print out and retain records, disclosures, etc. on paper, and a current and valid email address. You are responsible for the installation, maintenance, and operation of the computer and browser software that you use for these online services.

By clicking on the "I Agree" button below, you acknowledge that you are able to access information in the electronic form that will be used to provide the information that is the subject of this Consent Agreement.

Please indicate your consent to the use of electronic signatures and your consent to receiving disclosures and notices electronically by clicking on the "I Agree" button below. By providing your consent, you are also confirming that you have the hardware and software described above, that you are able to provide electronic signatures, and that you have an active email account. You are also confirming that you are authorized to provide this consent.

By clicking on the "I Agree" button I agree to the use of electronic signatures and to receiving documents and disclosures electronically.

If you DO NOT AGREE to the use of electronic signatures and to receiving documents and disclosures electronically, then please contact Fieldprint Customer Service at the following email address to assist you with a non-electronic option: customerservice@fieldprint.com or call 888-472-4311.

You can download the "Consent Agreement" as a PDF file.

[Consent Agreement.pdf \(120 KB\)](#) [Download](#)

[I do not agree](#)

[I Agree](#)

[Terms & Conditions](#)
Consent

[Fieldprint Privacy Policy](#)
Electronic Disclosure

[Fieldprint Privacy Policy](#)
Fieldprint Privacy Policy

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3.2 User enters information to create including Username, Password, and Security Questions and selects 'Continue.' **Note: Please record your password and security questions and answers securely. Answers to security questions cannot be duplicated.**

Create Account

Please fill in the following fields to create an account.

* Required Fields

Email*	<input type="text" value="e.g. example@domain.com"/>
Username*	<input type="text"/>
Password*	<input type="password"/> show
Confirm Password*	<input type="password"/> show
First Name*	<input type="text"/>
Last Name*	<input type="text"/>
Mobile Phone Number	<input type="text"/>

Security Questions

Please select three security questions and provide answers in the boxes below. Your answer(s) cannot contain your username, password, email address or security question.

Security Question 1*	<input type="text" value="Select one"/>
Answer 1*	<input type="text"/> show
Security Question 2*	<input type="text" value="Select one"/>
Answer 2*	<input type="text"/> show
Security Question 3*	<input type="text" value="Select one"/>
Answer 3*	<input type="text"/> show

[Back](#)

[Continue](#)

3.3 Following the completion of screen 3.2 the user will be taken to the 'Verify Account' screen. **Note: An 8-digit code will be sent to the email account entered on the previous screen. Enter the 8-digit code and select 'Complete Registration.'**

Verify Account

An email has been sent to your provided email address. The subject of the email will be "Fieldprint Scheduling Account Verification" and will arrive from email sender: auth@fieldprint.com.

Please follow the directions in the email to continue creating your account.
You may need to check your Junk or Spam folder.

① Please do not close your browser.

If your browsing session closes, please log back in using your username and password and enter the 8-digit Verification Code emailed to you at the email address provided during account creation. This Verification Code will expire after 30 minutes.

* — Required Fields

Verification Code*

Your 8-digit code

Didn't receive an email? Click [here](#) to resend email.

Complete Registration

3.4 User is returned to the Login screen. Select 'Log In' to continue with registration.

The screenshot shows the Fieldprint welcome screen. At the top left is the Fieldprint logo, and at the top right are links for 'English' and 'Contact Us'. The main heading is 'Welcome to Fieldprint®'. Below this, there are two columns. The left column is titled 'Sign Up' and includes the text 'For new users, please select "Sign Up" below to schedule a fingerprinting appointment.' Below this text is a dark blue button labeled 'Sign Up'. The right column is titled 'Returning User Login' and includes the text 'For existing users, please select "Login" below to check appointment status, view and print receipts or reschedule an existing appointment.' Below this text is a light blue button labeled 'Login'.

3.5 Provide answer to security question and select 'Continue.' **Note: This Question and Answer was created during account creation with Fieldprint.**

The screenshot shows the Fieldprint login confirmation screen. At the top left is the Fieldprint logo. The main heading is 'Login Confirmation'. Below this, there is a text input field labeled 'What was your childhood nickname?' with the text 'Your Answer' inside. Below the input field is a checkbox labeled 'Remember this device/computer for future visits'. At the bottom of the form is a blue button labeled 'Continue'.

3.6 Enter ALSDE ID#, Last Name, and DOB and select 'Continue'

Data Collection

Alabama DOE Demographics

Required Fields

ALSDE ID#

Last Name

Date of Birth

Month

Day

Year

Continue

3.7 Enter contact information and select 'Continue.'

Data Collection

Contact Information

Required Fields

Phone

Alternate Phone

Email

Preferred Contact Method

Appointment Reminder

Continue

3.8 Review AL DOE Release form and select 'I agree' then 'Continue.'

[illegible]

3.9 Review Fieldprint Biometric Disclosure form and select 'I agree' then 'Continue.'

[illegible]

3.10 Review the FBI Noncriminal Justice Applicant Privacy Rights Statement and select 'I acknowledge...' then 'Continue.'

[illegible]

3.11 Review the Privacy Act Statement and select 'I acknowledge...' then 'Continue.'

Data Collection

☒ I have read this document

☒ I understand

Authorization

☒ I acknowledge

☒ I do not acknowledge

☒ I do not understand

☐ I do not understand

FBI Privacy Statement and Privacy Notice

Privacy Act Statement

This privacy statement is located on the back of the FD-311 Application

Authority: The FBI has a legal obligation to protect the privacy of the personal information it collects, maintains, and disseminates. This obligation is derived from the Privacy Act of 1974, 5 U.S.C. 552a, and the Federal Information Security Management Act of 2002, 44 U.S.C. 3401. The FBI is committed to protecting the privacy of the personal information it collects, maintains, and disseminates.

Purpose: The purpose of this privacy statement is to inform you of the FBI's policies and procedures regarding the collection, maintenance, and dissemination of your personal information.

Collection: The FBI collects personal information from you when you apply for a position with the FBI. The information collected includes your name, date of birth, social security number, and other identifying information.

Maintenance: The FBI maintains your personal information in its files and databases. The FBI uses this information to process your application and to conduct background checks.

Dissemination: The FBI disseminates your personal information to other federal agencies and to state and local law enforcement agencies as needed for law enforcement purposes.

Access: You have the right to access and review the personal information the FBI has collected about you. You may request access to your information by writing to the FBI Privacy Officer.

Correction: You have the right to request that the FBI correct or delete inaccurate, incomplete, or outdated information.

Destruction: The FBI destroys your personal information when it is no longer needed for law enforcement purposes.

Contact: If you have any questions or concerns regarding this privacy statement, please contact the FBI Privacy Officer.

See Page 2 for your signature

1

Declaration de la Ley de Privacidad

Esta declaración de la ley de privacidad es enmendada de la FD-311 sobre de la Ley de Privacidad

Autoridad: El FBI tiene una obligación legal de proteger la privacidad de la información personal que recolecta, mantiene y divulga. Esta obligación se deriva de la Ley de Privacidad de 1974, 5 U.S.C. 552a, y la Ley de Administración de la Seguridad de la Información de 2002, 44 U.S.C. 3401. El FBI se compromete a proteger la privacidad de la información personal que recolecta, mantiene y divulga.

Propósito: El propósito de esta declaración de privacidad es informarle de las políticas y procedimientos del FBI respecto a la recolección, mantenimiento y divulgación de su información personal.

Recolección: El FBI recolecta información personal de usted cuando aplica para un puesto en el FBI. La información recolectada incluye su nombre, fecha de nacimiento, número de seguro social y otra información de identificación.

Mantenimiento: El FBI mantiene su información personal en sus archivos y bases de datos. El FBI utiliza esta información para procesar su solicitud y para realizar chequeos de antecedentes.

Divulgación: El FBI divulga su información personal a otras agencias federales y a agencias estatales y locales de la ley para fines de la ley.

Acceso: Usted tiene el derecho de acceder y revisar la información personal que el FBI ha recolectado sobre usted. Puede solicitar acceso a su información escribiendo al Oficial de Privacidad del FBI.

Corrección: Usted tiene el derecho de solicitar que el FBI corrija o elimine información inexacta, incompleta o obsoleta.

Destrucción: El FBI destruye su información personal cuando ya no es necesaria para fines de la ley.

Contacto: Si tiene alguna pregunta o inquietud sobre esta declaración de privacidad, por favor contacte al Oficial de Privacidad del FBI.

Ver la página 2 para su firma

2

TO SEE THIS STATE, YOU CERTIFY UNDER PENALTY OF PERJURY THAT YOU ARE THE SAME PERSON WHO IS REVIEWING THIS STATEMENT, WHO IS REVIEWING ALL OF THE AFFIDAVIT INFORMATION AND CERTIFYING TO THE APPLICABLE FORMS, IT IS TRUTHFUL AND CORRECT FOR ALL INFORMATION RELATES TO THE PERSON WHO IS REVIEWING THIS STATEMENT, UNLESS YOU HAVE WRITTEN A SEPARATE STATEMENT FOR EACH CERTIFICATE SUCH AS A CERTIFICATE FROM A POLICE OFFICER, OR THE POLICE OFFICER'S SIGNATURE, OR THE POLICE OFFICER'S SIGNATURE.

☐ I have read this statement and certify that I am the same person who is reviewing this statement.

Schedule Appointment and Payment

- 4.1 Enter full address, city, state or zip code and select 'Find' to determine find the Fieldprint locations nearest you and select an appointment date. Next select an 'Find Availability' to schedule an appointment time. **Note: The business name, address, and other information will be displayed.**


[English](#) | [Contact Us](#) |

Data Collection	Fieldprint Location
<input checked="" type="checkbox"/> Alabama DOE Demographics <input checked="" type="checkbox"/> Contact Information	Please enter an address below to locate nearby Fieldprint locations. <input type="text" value="50 North Ripley, Montgomery, AL 36116"/> <input type="button" value="X"/> <input type="button" value="Find"/> <input checked="" type="checkbox"/> Nearby Home Address
Authorization	
<input checked="" type="checkbox"/> AL DOE Release <input checked="" type="checkbox"/> Biometric Disclosure	

2 Results for 50 North Ripley, Montgomery, AL 36116

Please use the options below to proceed with scheduling.

[X Clear Filter](#)

Sun 19 Mar	Mon 20 Mar	Tue 21 Mar	Wed 22 Mar	Thu 23 Mar	Fri 24 Mar

1. Fieldprint Site - Bradley Screening

5283 Vaughn Road, Montgomery AL 36116-

MTUWTH F 08:30 AM - 04:30 PM

☒ No Additional Fees
 ☒ ADA Compliant
 ☒ Livescan
 ☒ Expedited Processing
 ☒ Photo
 ☒ I9

5.23 mi

2. Fieldprint Site - PostNet

7806 Vaughn Road, Cornerstone Shopping Center, Montgomery AL 36116-

MTUWTH F 09:00 AM - 03:00 PM

☒ No Additional Fees
 ☒ ADA Compliant
 ☒ Livescan
 ☒ Expedited Processing
 ☒ Photo
 ☒ I9

Page 14 of 18

4.2 Select 'Part of day' and time of requested appointment.

English | Contact Us |

Data Collection

☒ Alabama DOE Demographics
 ☒ Contact Information

Authorization

☒ AL DOE Release
 ☒ Barometric Disclosure
 ☒ FBI (Noncriminal Justice Appointments Privacy Rights)
 ☒ FBI Privacy Statement and Privacy Notice

Schedule Appointment

Fieldprint Location

Back to 2 Results

Schedule Appointment

Fieldprint Site - Bradley Screening, 5163 Vaughn Road, Montgomery AL 36116
 M T U W T H F 08:30 AM - 04:30 PM
 5.23 mi

Note

Once an appointment is scheduled, it may not be changed or canceled less than 24 hours before the appointment time without incurring a charge.

* - Required Fields

Available Date*

March

20

2023

Part of day*

Morning (before 12 PM)

10:00 AM

Continue

4.3 Select 'Debit or Credit Card' or 'PayPal' as your payment option.

Data Collection

☒ Alabama DOE Demographics
 ☒ Contact Information

Authorization

☒ AL DOE Release
 ☒ Barometric Disclosure
 ☒ FBI (Noncriminal Justice Appointments Privacy Rights)
 ☒ FBI Privacy Statement and Privacy Notice

Schedule Appointment

Payment

Note

Once an appointment is made, you may not make a change or cancel less than 24 hours before the appointment time without incurring a charge. Your appointment will not be scheduled until payment has been completed.

Date and Time

March 20, 2023 10:00 AM

Location

Fieldprint Site - Bradley Screening
5163 Vaughn Road, Montgomery AL 36116

Fee Type

Fee

Fieldprint Scheduling Fee	\$7.95
FBI Fee	\$38.25
Your Total to Pay:	\$46.20

Payment Method

PayPal

☐ Debit or Credit Card

4.4 Insert Payment Account Information

☒ Biometric Disclosure☒ FBI Non-Criminal Justice
Applicant's Privacy Rights☒ FBI Privacy Statement and
Privacy Notice

Fee Type	Fee
Fieldprint Scheduling Fee	\$7.95
FBI Fee	\$38.25
Your Total to Pay:	\$46.20

Schedule Appointment

Payment

Payment Method

☐ Debit or Credit Card

X

Card number

Expires

CSC

Billing address

US

First name

Last name

Street address

Apt., ste., bldg.

City

State

Alabama

ZIP code

60820

Phone

+1 (312) 694-4557

Email

Test@user.com

☒ Ship to billing address

By continuing, you confirm you're 18 years or older.

Continue

Back to Billing



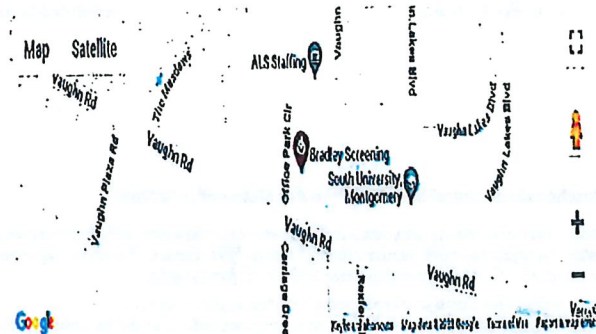
[Print Confirmation](#) [Get Directions](#) [Download Printable Documents](#)

Date and Time: Monday, March 20, 2023 10:00 AM
Location:  Fieldprint Site - Bradley Screening
5283 Vaughn Road,, Montgomery AL 36116

✓ FBI Privacy Statement and Privacy Notice



Fieldprint uses a camera to scan the QR code and locate your unique appointment information. The camera does not save data or records.



Payment

Payment Date	Transaction ID	Amount	Fee Type
March 19, 2023 9:02 AM	9UB91469RF928593G	\$ 46.20	Fieldprint Scheduling Fee - \$ 7.95 FBI Fee - \$ 38.25

What to Bring to Your Appointment?**Notice**

Original Documents are required. Photocopies will not be accepted.

- Please provide your appointment number to the technician at the time of your appointment. You may print this appointment confirmation page or bring with you via phone or email.
- For purposes of confirming your identity for your appointment, you must present one form of a current, valid, unexpired government-issued photo ID.

If you do not bring two valid, unexpired, acceptable forms of ID, your appointment cannot be completed. The name provided for the appointment must match both forms of identification and the date of birth must be on the primary form of ID, and must match exactly.

Identification required to complete your appointment**Primary ID for Fingerprinting**

- State-issued driver's license
- State-issued non-driver identity
- U.S. Passport / Passport Card
- Military Identification Card
- DOD Common Access Card
- Work Visa w/ photo
- Global Entry Card
- Native American Tribal ID Card
- Permanent Resident Card (I-551)
- I-766 Employment Authorization Card
- Foreign Passport
- Foreign Driver's License

Secondary ID for Fingerprinting

- State-issued driver's license
- State-issued non-driver identity
- U.S. Passport / Passport Card
- Military Identification Card
- Bank Statement/Paycheck Stub
- Utility Bill / Insurance Card
- Credit Card/Debit Card
- Marriage Certificate
- Birth Certificate
- US Dept of Veteran Affairs Card
- Draft Record
- Transportation Worker ID Credential (TWIC Card)
- Certificate of Citizenship
- Certificate of Naturalization
- Native American Tribal ID Card
- Permanent Resident Card (I-551)
- DOD Common Access Card
- Work Visa w/ photo

Reschedule or Cancel Minnie Brown Appointment (#6202099)

Please note that once an appointment is made, you may not make a change or cancel less than 24 hours before the appointment time without incurring a charge. If you need to reschedule your appointment or cancel, please click the corresponding button below or call 677-614-1354.

If you decide to reschedule your appointment in the future, please return to [alabamascertificationfieldprint.com](https://www.alabamascertificationfieldprint.com), log in as an existing user, and click on the Reschedule button to make a new appointment.

Cancel Appointment

Reschedule

Back to Home

Log Out

Alabama DHR Child Abuse/Neglect "Erin's Law"

Mandatory Reporting and Required Training

As a school employee or substitute, you are required by law to report any suspected child Abuse/neglect to your local Department of Human Resources (DHR). Anyone can make a report, not just the counselor. Our local DHR has requested that the person making the report should be the FIRST person that the child has talked to about an incident or anyone whose suspicions have been raised regarding the health/safety of a student.

We ask any time you make a report that you make the local school counselor aware of the Situation. (If DHR worker is sent to the school to investigate, they typically do so through the Counselor's office).

When making a report, always try first to call DHR (205-554-1100 or 205-554-1116 or 205-554-1117), although it is sometimes difficult to get through by phone. If that is the case, there is a form that can be filled out and faxed to DHR. The Alabama DHR website states that reports should NOT be emailed. Blank forms will be located in one of the mailboxes in the teacher's workroom directly behind the main office. If you fax a report, please give the counselor a copy of the report.

If you need assistance or support when reporting suspected abuse/neglect, please don't hesitate to let the counselor know! He or she will be glad to help any way they can.

Interactive Training

All faculty/staff/substitute personnel are required to complete an interactive training about Mandatory reporting. **You will receive professional development time for completing this training in you need it for certification purposes.**

Directions:

1. Go to <https://aldhr.remote-learner.net/>
2. Read the general information this page, then click "Get Started"
3. Select 2023 Child Abuse Mandated Reporter Training
4. Create a new account
5. Complete all portions of the training (does not have to be completed in one sitting)
6. Print a copy of your Erin's Law Certificate of completion (required documentation) and save a copy for your files.
7. Certificate of completion must be sent to the Transportation Department Office. You can also fax certificate to 205-247-4189 or email the certificate to Donna Hickman at djhickman@tcss.net

Commercial Learner Permit Fee's and Requirements

- Current driver license
- Social Security card *
- 2 Proofs of Principal Residence ***
- If transferring from out of state, applicant must present one document from the "primary" list (in addition to the Social Security number document)
- Current Department of Transportation long medical form (unless medically exempt)
- \$25 testing fee (no checks)
- Transportation Security Administration background check if transferring or obtaining a hazardous materials endorsement
- If not a U.S. citizen, applicant must legally be in permanent status in the United States and domiciled in Alabama
- Skills test if upgrading a license or first-time applicant (test by appointment only; \$20 skills test fee)
- Proof of insurance
- \$66.25 to purchase class "A" license
- \$56.25 to purchase class "B" license
- \$36.25 to purchase class "C" license
- \$36.25 to purchase commercial learner license

If being issued a CDL for the first time, or upgrading, a Commercial Learner Permit will be issued first and must be held for at least 14 days before testing for the CDL.

The CLP is valid for 180 days and may be renewed one time.

***Social Security Verification**

- Social Security card (original) - required of all applicants who have been assigned and/or are eligible for the assignment of a Social Security number by the Social Security Administration
- U.S. military form DD 214
- Medicare/Medicaid identification card (if Social Security number is followed by the letter "A")
- W2 tax form

*****Proof of Principal Residence Documents**

- Voter Registration Card
- Residential Mortgage Contract
- Current Lease or Rental agreement for housing
- Proof of payment of residential property tax (Homestead)
- Previous year tax returns bearing applicants address
- Vehicle registration bearing applicants name and address
- Utility bill (Water, Gas, or Electric) less than 90 days old
- Any State or Federal Court documents indicating residence address
- School enrollment documentation
- Defense Department Form 214 (Report of Separation)
- Sex offender registration documents
- Current Homeowners insurance policy with name and address
- Social Security benefits statements/summary mailed to physical address
- U.S. or State Government check or other document mailed to applicants physical address
- Military Orders documenting duty station and place of residence.

**If utility bills or other similar documents feature the name of the applicant's spouse or parent, the applicant must produce a marriage certificate or birth certificate verifying residence address.*

CDL Cost: \$25.00 testing fee (\$15.00 to re-take any test that you do not pass)
\$36.25 to purchase commercial learner license
\$56.25 to purchase class "B" license

[Document Requirements And Fees | Alabama Law Enforcement Agency \(alea.gov\)](http://alea.gov)

ALEA DL Office

City Tuscaloosa
Office ALEA
Status Open
Days Open M-Sa
Hours 7 am - 4 pm (Reinstatement opens at 8 am); (Sa) 7 am - 3 pm
Lunch 12:30 pm - 1:30 pm (Reinstatement)
Address Trooper Post, 2645 Skyland Blvd E, Tuscaloosa AL 35405
Phone (205) 553-0729

Bus Driver Physical: The cost of the Physical could range from \$75.00 - \$150.00 depending on where you go to obtain the exam.

Alabama School Bus Driver Physical Exam Form: (Included in your packet)

[Alabama School Bus Driver Physical Examination Form \(alabamaachieves.org\)](http://alabamaachieves.org)

DOT Medical Card:

If you choose to do the DOT Physical Exam you will get that form from the Physician.

Clearinghouse:

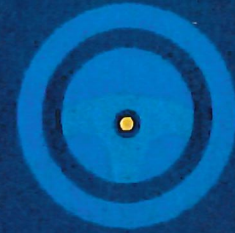
After getting your CDL Learner Permit or after obtaining your CDL you will need to register in the Clearing House. Instructions are in your packet. If you do not have access to a computer, we have one in the driver's lounge.

Also after you register and after we enter your information you will get an email asking for your consent to do the query. You must give us consent before we can start training you.

On back of Clearing House packet there is a consent form that you will also need to sign and turn back in with your application.

Federal Motor Carrier Safety Administration

DRUG & ALCOHOL CLEARINGHOUSE



REGISTRATION: CDL DRIVERS

You must complete the registration process before you can respond to employer consent requests or access your driver record in the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse. The Instructions below are for a driver who holds either a commercial driver's license (CDL) or commercial learner's permit (CLP).

Create a Login.gov Account

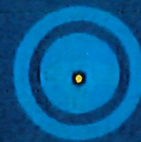
Accessing the Clearinghouse requires the creation of an account with login.gov, a shared service that offers secure online access to participating government systems, including the Clearinghouse. If you do not have a login.gov account, or would like to create a new one, you will need to follow the steps below.

During the login.gov registration process, after 15 minutes of inactivity, the current page will clear whatever information is entered into data fields.

1

Visit <https://clearinghouse.fmcsa.dot.gov/register> and click **Go to login.gov**.

The screenshot shows the FMCSA Drug & Alcohol Clearinghouse registration page. At the top, the FMCSA logo and 'DRUG & ALCOHOL CLEARINGHOUSE' are displayed. Below this, a large heading reads 'Register for the Clearinghouse now and be ready for Implementation'. To the right, a box for 'GOVERNMENT PERSONNEL' states that enforcement personnel and State Driver Licensing Agencies should not complete Clearinghouse registration. The main body of the page has a light blue background with a grid of three dark blue boxes for 'DRIVERS', 'EMPLOYERS', and 'SAPS & MROS'. A red box highlights the 'Go to login.gov' button, and a red line connects the number '1' to it.



5

Create a password. This password must be at least 12 characters long. If the password you enter is not strong enough, you will not be able to continue. Enter a strong password and click **Continue**.

6

Select an option to secure your account and click **Continue**.

Login.gov requires the completion of a user verification process to ensure the proper person is using those credentials. Follow the instructions for the method you select.





8

Once you have completed setting up your first authentication method, you will be prompted to set up a second authentication method. You'll only use one authentication method to sign in, but you will need to set up two methods in case you lose access to one. Repeat steps 6 and 7 to set up your second method.

LOGIN.GOV

DRUG & ALCOHOL
CLEARINGHOUSE



You successfully set up Phone as your first authentication method.

Next, you'll set up another method.

Continue

[Cancel account creation](#)

9

You have created your login.gov account. Click **Continue** to return to the Clearinghouse website and complete your Clearinghouse registration.

LOGIN.GOV

DRUG & ALCOHOL
CLEARINGHOUSE



You have created your account with login.gov

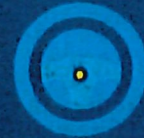
You can now sign in to The FMCSA Drug & Alcohol Clearinghouse.

Continue

This is the only information login.gov will share with DOT:

✔ Email address





11

Enter your contact information and click **Next**. All fields are required unless otherwise noted. Your email address will be pre-filled with your login.gov username and cannot be modified.

U.S. Department of Transportation | U.S. Federal Motor Carrier Safety Administration

FMCSA

DRUG & ALCOHOL
CLEARINGHOUSE

FAQ About Contact

Do you need help? Download step-by-step instructions for driver registration.
(Necesita ayuda? Descargue las instrucciones para el registro de conductores.)

1 2 3 4 5

LOG IN.GOV ROLE SELECTION CONTACT INFORMATION CDL TERMS & CONDITIONS

3. Contact Information

Enter your contact information below. All fields are required unless otherwise noted.

Name/Phone/Email

First Name

Middle Name (Optional)

Last Name

Phone Number Type

Alternate Phone Number (Optional) Type

Email Address (Login.gov Username)
www.fmcsclearinghouse.com

Address (Physical)

Street City

Country State ZIP Code

Address (Mailing) ☒ Same as Physical Address

Preferred Contact Method

☒ **Email**
Receive instant notifications when your information is updated in the Clearinghouse. Selecting this option will help you avoid unnecessary delays in responding to time-sensitive requests.

☐ **U.S. Mail**
Letters will be sent via the United States Postal Service 3-4 business days after your information has been updated. Please allow two weeks for delivery.

Previous Next Cancel





13

Enter your **current** commercial driver's license (CDL) or commercial learner's permit (CLP) information. Click **Verify**. The Clearinghouse will verify this information against information in the Commercial Driver's License Information System (CDLIS).

The screenshot shows the FMCSA Drug & Alcohol Clearinghouse registration process. At the top, there's a navigation bar with the FMCSA logo, 'DRUG & ALCOHOL CLEARINGHOUSE', and links for 'Register', 'Login', 'FAQ', 'About', and 'Contact'. Below the navigation bar, there's a progress indicator with five steps: 1. LOGIN.GOV, 2. ROLE SELECTION, 3. CONTACT INFORMATION, 4. CDL, and 5. TERMS & CONDITIONS. Step 4 is currently selected. A red box highlights the '4. Commercial Driver's License Information' section. This section contains a form with the following fields: First Name (Sam), Last Name (Jones), Country (United States), State (Alabama), CDL Number (1234567), and Date of Birth (January 01, 1955). At the bottom of the form, there are three buttons: 'Previous', 'Verify', and 'Cancel'. A red line connects the number 13 to the 'Verify' button.

4. Commercial Driver's License Information

Enter your **current** commercial driver's license (CDL) information below. This information will be verified against your information in the Commercial Driver's License Information System (CDLIS).

First Name: Sam

Last Name: Jones

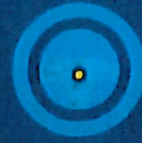
Country: United States

State: Alabama

CDL Number: 1234567

Date of Birth: January 01, 1955

Buttons: Previous, Verify, Cancel



15

Review the Clearinghouse terms and conditions.

FMCSA

DRUG & ALCOHOL
CLEARINGHOUSE

FAQ About Contact

Do you need help? Download step-by-step instructions for driver registration.
¿Necesita ayuda? Descargue las instrucciones para el registro de conductores.

LOGIN.GOV ROLE SELECTION CONTACT INFORMATION CDL TERMS & CONDITIONS

5. Terms and Conditions

FMCSA IT Rules of Behavior
As a user of the Federal Motor Carrier Safety Administration (FMCSA) Drug and Alcohol Clearinghouse, I understand that I am personally responsible for the use and any misuse of my system account and password. I also understand that by accessing a U.S. Government Information system, I must comply with the following requirements:

☐ I accept the FMCSA Privacy Policy (see <https://www.transportation.gov/dot-website-privacy-policy>).
☐ I affirm that all the information provided is true and accept all of the terms above.

Previous I Agree Cancel

Check the box to confirm that you agree to the terms and conditions and click **I Agree**.

Your Clearinghouse registration is complete.

You will be directed to your Dashboard, a logged-in home page for your Clearinghouse activity. This is where you will come to respond to employer consent requests, review your Clearinghouse record, and make changes to your Clearinghouse account.

Federal Motor Carrier Safety Administration

DRUG & ALCOHOL CLEARINGHOUSE



REGISTRATION: CDL DRIVERS

You must complete the registration process before you can respond to employer consent requests or access your driver record in the FMCSA Commercial Driver's License Drug and Alcohol Clearinghouse. The Instructions below are for a driver who holds either a commercial driver's license (CDL) or commercial learner's permit (CLP).

Create a Login.gov Account

Accessing the Clearinghouse requires the creation of an account with login.gov, a shared service that offers secure online access to participating government systems, including the Clearinghouse. If you do not have a login.gov account, or would like to create a new one, you will need to follow the steps below.

During the login.gov registration process, after 15 minutes of inactivity, the current page will clear whatever information is entered into data fields.

1

Visit <https://clearinghouse.fmcsa.dot.gov/register> and click **Go to login.gov**.

FMCSA
DRUG & ALCOHOL
CLEARINGHOUSE

FAQ About Contact

Register for the Clearinghouse now and be ready for Implementation

Authorized users must register to request access to information in the Clearinghouse. You will need to sign in with a login.gov account to begin your Clearinghouse registration.

Need a login.gov account? Click the link below to create your login.gov account.

GO TO LOGIN.GOV

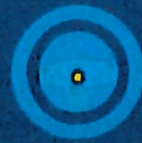
GOVERNMENT PERSONNEL
FMCSA enforcement personnel and State Driver Licensing Agencies should not complete Clearinghouse registration. Login using your FMCSA Portal credentials.

Why register now?
Don't wait! Registering now lets you complete the steps below so that you can be ready when the Clearinghouse is operational on January 6, 2020.

DRIVERS
Enter your CDL information and confirm it. Information is available to employers.

EMPLOYERS
Does a CDL manager oversee drug and alcohol testing program? Designate them today. Have an FMCSA Portal account? Link it with your Clearinghouse account.

SAPS & HQS
Invite Associates from your company and get set up so you can receive information as soon as the Clearinghouse is operational.



5

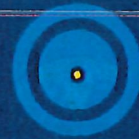
Create a password. This password must be at least 12 characters long. If the password you enter is not strong enough, you will not be able to continue. Enter a strong password and click **Continue**.

6

Select an option to secure your account and click **Continue**.

Login.gov requires the completion of a user verification process to ensure the proper person is using those credentials. Follow the instructions for the method you select.





8

Once you have completed setting up your first authentication method, you will be prompted to set up a second authentication method. You'll only use one authentication method to sign in, but you will need to set up two methods in case you lose access to one. **Repeat steps 6 and 7 to set up your second method.**

LOGIN.GOV

DRUG & ALCOHOL
CLEARINGHOUSE



You successfully set up Phone as your first authentication method.

Next, you'll set up another method.

Continue

[Cancel account creation](#)

9

You have created your login.gov account. Click **Continue** to return to the Clearinghouse website and complete your Clearinghouse registration.

LOGIN.GOV

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CLEARINGHOUSE



You have created your account with login.gov

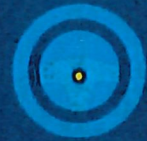
You can now sign in to The FMCSA Drug & Alcohol Clearinghouse.

Continue

This is the only information login.gov will share with DOT:

Email address





11

Enter your contact information and click **Next**. All fields are required unless otherwise noted. Your email address will be pre-filled with your login.gov username and cannot be modified.

U.S. Department of Transportation
Federal Motor Carrier Safety Administration

FMCSA

DRUG & ALCOHOL
CLEARINGHOUSE

FAQ About Contact

Do you need help? Download step-by-step instructions for driver registration.
¿Necesita ayuda? Descargue las instrucciones para el registro de conductores.

1 LOGIN.GOV 2 ROLE SELECTION 3 CONTACT INFORMATION 4 CDL 5 TERMS & CONDITIONS

3. Contact Information

Enter your contact information below. All fields are required unless otherwise noted.

Name/Phone/Email

First Name

Middle Name (Optional)

Last Name

Phone Number Type

Alternate Phone Number (Optional) Type

Email Address (Login.gov Username)
www@clearinghouse.gov

Address (Physical)

Street City

Country State ZIP Code

Address (Mailing) ☒ Same as Physical Address

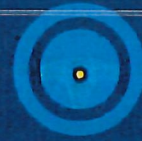
Preferred Contact Method

☒ **Email**
Receive instant notifications when your information is updated in the Clearinghouse. Selecting this option will help you avoid unnecessary delays in responding to time-sensitive requests.

☐ **U.S. Mail**
Letters will be sent via the United States Postal Service 3-4 business days after your information has been updated. Please allow two weeks for delivery.

PREVIOUS NEXT Cancel





13

Enter your **current** commercial driver's license (CDL) or commercial learner's permit (CLP) information. Click **Verify**. The Clearinghouse will verify this information against information in the Commercial Driver's License Information System (CDLIS).

U.S. Department of Transportation
Federal Motor Carrier Safety Administration

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Do you need help? [Download step-by-step instructions for driver registration.](#)
¿Necesita ayuda? [Descargue las instrucciones para el registro de conductores.](#)

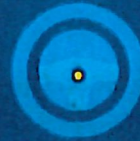
1 LOGIN.GOV 2 ROLE SELECTION 3 CONTACT INFORMATION 4 CDL 5 TERMS & CONDITIONS

4. Commercial Driver's License Information

Enter your current commercial driver's license (CDL) information below. This information will be verified against your information in the Commercial Driver's License Information System (CDLIS).

First Name Sam	Last Name Jones
Country United States	State Alabama
CDL Number 1234567	Date of Birth January (01) 1955

Previous Verify Cancel



15

Review the Clearinghouse terms and conditions.

The screenshot shows the FMCSA Drug & Alcohol Clearinghouse registration process. At the top, there's a navigation bar with the FMCSA logo and links for 'FAQ', 'About', and 'Contact'. Below this is a progress bar with five steps: 'LOGIN.GOV', 'ROLE SELECTION', 'CONTACT INFORMATION', 'CDL', and 'TERMS & CONDITIONS'. The 'TERMS & CONDITIONS' step is highlighted with a blue circle containing the number '5'. Below the progress bar, there's a section titled '5. Terms and Conditions' with the heading 'FMCSA IT Rules of Behavior'. The text states: 'As a user of the Federal Motor Carrier Safety Administration (FMCSA) Drug and Alcohol Clearinghouse, I understand that I am personally responsible for the use and any misuse of my system account and password. I also understand that by accessing a U.S. Government information system, I must comply with the following requirements:'. Below this text, there's a checkbox labeled 'I accept the FMCSA Privacy Policy (see https://www.transportation.gov/dot-website-privacy-policy)' and another checkbox labeled 'I affirm that all the information provided is true and accept all of the terms above.' At the bottom, there are three buttons: 'Previous', 'I Agree', and 'Cancel'.

Check the box to confirm that you agree to the terms and conditions and click **I Agree**.

This is a close-up of the registration form. It shows the checkbox for 'I affirm that all the information provided is true and accept all of the terms above.' which is checked. Below the checkbox, there are three buttons: 'Previous', 'I Agree', and 'Cancel'. The 'I Agree' button is highlighted with a red box.

Your Clearinghouse registration is complete.

You will be directed to your Dashboard, a logged-in home page for your Clearinghouse activity. This is where you will come to respond to employer consent requests, review your Clearinghouse record, and make changes to your Clearinghouse account.

Application for Employment
(Non-Instructional Classified Support Positions)



Personal Information			
Last Name		First Name	Middle Initial
Birth Date		Social Security Number	
Address	City	State	Zip
Home Phone Number	Cell Phone Number	Email Address	
Employment Preference			
Position(s) you are applying for:			Available start date

Educational Background			
High School Name	Location	Years Attended	Diploma/GED
Vocational School Name			Diploma/Certification
College Name			Degree Awarded
College Name			Degree Awarded

Employment History (A resume may be attached for this section) – Start with most recent position		
Employer (1)	Job Title	Dates Employed
Supervisor	Phone Number	Email Address
Address	City	State, Zip
Currently working in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving	Status <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary
Briefly describe your duties and accomplishments		

Application for Employment
(Non-Instructional Classified Support Positions)



Employer (2)	Job Title	Dates Employed
Supervisor	Phone Number	Email Address
Address	City	State, Zip
Currently working in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving	Status <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary
Briefly describe your duties and accomplishments		
Employer (3)	Job Title	Dates Employed
Supervisor	Phone Number	Email Address
Address	City	State, Zip
Currently working in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving	Status <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary
Briefly describe your duties and accomplishments		
Employer (4)	Job Title	Dates Employed
Supervisor	Phone Number	Email Address
Address	City	State, Zip
Currently working in this position? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving	Status <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary
Briefly describe your duties and accomplishments		

References (at least two must be work-related)			
Name	Relationship to applicant	Phone Number	Email Address

Application for Employment
(Non-Instructional Classified Support Positions)



CERTIFICATION OF APPLICATION FOR EMPLOYMENT

Please read the following statements carefully and initial the boxes as confirmation of your having read and accepted these conditions:

_____ I certify that, to the best of my knowledge, all information provided by me on this employment application and all other information provided by me in the course of applying for employment with the Tuscaloosa County School System is truthful, accurate, and complete.

_____ I consent to the submission of my fingerprints to the Alabama Bureau of Investigation and the Federal Bureau of Investigation for reports on my criminal history, and I consent to the release of such criminal history background information to the State Department of Education and any local board of education with whom I seek employment. I hereby release the Alabama State Department of Education, the Tuscaloosa County School System and its employees, representatives, and agents thereof from any and all liability claims or damages for the acquisition and use of information obtained from these sources or developed as a result of contacting the previously named sources.

_____ Alabama school boards are required by state law to verify the employment eligibility of newly hired employees by using the federal E-Verify program. New employees are required to provide a Social Security number, an unexpired identity document that contains a photograph, and other acceptable documents that establish employment eligibility. In addition to determining whether a new hire is authorized to work in the United States, E-Verify will confirm that the employee's name and Social Security number match.

_____ I hereby authorize the Tuscaloosa County School System with whom I seek employment to obtain information relating to my current and previous employment, education, personal history records, military service records, and criminal history records.

_____ I hereby authorize the release of any information relating to my current and previous employment, education, personal history records, military service records, and criminal history records. I fully waive any rights or claims I have against the organization(s), its employees, representatives, and agents providing such information from any and all liability claims or damages that may directly or indirectly result from the use, disclosure, release or omission of any such information by any person or party.

_____ I understand that, if employed in a position that requires driving as one of the tasks, it is my duty to immediately advise my department head in writing of all traffic accidents and/or driving violation citations I have received or may receive in the future. Furthermore, it is my duty to immediately advise my department head in writing of changes in my health condition that may present a threat of harm to my own health or safety, or to the health and safety of others. Failure to comply may be deemed just cause for termination by the local board of education. I further understand that every local board of education within Alabama has a vital interest in maintaining safe, healthful, and efficient working conditions for its students, the public, and vehicle operators. Using or being under the influence of alcohol and/or drugs on the job is illegal and may pose serious safety and health risks not only for the user, but to all those who come in contact with the user. The possession, use or sale of alcohol or an illegal drug poses unacceptable risks to safe, healthful, and efficient operations.

_____ (If required by job description)

- a. I hereby understand and agree to submit to pre-employment alcohol and drug testing, pursuant to the Code of Federal Regulations (49 CFR §382), which requires CDL drivers who wish to be considered for employment to submit to pre-employment alcohol and drug testing.
- b. I understand that any CDL driver applicant who is unwilling to agree to these conditions should not apply for employment to any board of education or specialty school within Alabama.
- c. I understand that a positive alcohol and/or drug test, or a refusal to test, will result in an application for employment no longer being considered or a withdrawal of an offer of employment, if an offer has been made.

The Tuscaloosa County School System does not discriminate on the basis of age, race, color, sex, sexual orientation, religious preference, marital status, disability, national origin, or any other reason prohibited by state or federal law. Employees of the District are required to comply with the provisions of Title VII of the Civil Rights Act and Title IX of the 1972 Educational Amendments.

Your application once submitted, become the property of the Tuscaloosa County School System and are public records. Your application will be kept on file for one year.

Applicant Signature: _____ Date: _____



Alabama State Department of Education

Alabama School Bus Driver Physical Examination Report



Alabama Act 2012-372 and the Rules of the Alabama State Board of Education mandate that a person must be "physically qualified" to operate a school bus "transporting students to and from school or school-related events." The purpose of this physical examination is to detect the presence of physical and/or mental defects of such a character and extent as to affect the driver's ability to safely perform the required duties of a school bus driver in normal and/or emergency circumstances. A waiver may be granted for any condition noted (marked "yes") in the Report, if the physician documents, in Section V of this Report, that the condition will not adversely affect the driver's ability to control and safely operate a school bus.

Directions:

This form must be completed and signed by a duly licensed physician and the driver. The original copy must be filed in the superintendent's office of the employing local board of education. The board of education may, at their discretion, issue a certificate of compliance to their drivers. Certificates of compliance are available on the Alabama State Department of Education, Pupil Transportation web site at www.alsde.edu or by calling 334-694-4545. Physical Examination Reports are valid for two years from examination date, unless a shorter period is specified by the examining physician.

I. Driver Information: (to be completed by driver)

Employing Local BOE: _____

Name: _____
Last First MI
DOB: _____ Address: _____
mm/dd/yyyy Street City
SSN: XXX-XX- Phone Numbers: Cell: Driver license #:

II. To be Completed by a Duly Licensed Physician: (or PA, NP)

After examining the school bus driver named above, please check (✓) NO or YES, as applicable, in response to each question.

Does the school bus driver named in Section I above.....

	NO	*YES	*If "YES," will this condition adversely affect the driver's ability to control and safely operate a school bus? Briefly explain below.
1.have a loss of a foot, a leg, a hand, or an arm?			
....have an impairment of any of the following:			
2. a. a hand or finger which interferes with prehension or power grasping?			
b. an arm, foot, or leg which interferes with the ability to perform normal tasks associated with driving a school bus?			
3.have an established medical history or clinical diagnosis of diabetes mellitus requiring insulin for control?			
4.have a current clinical diagnosis of myocardial infarction, angina pectoris, coronary insufficiency, thrombosis, or any other cardiovascular disease of a variety known to be accompanied by syncope, dypsea, collapse, or congestive cardiac failure?			
5.have an established medical history or clinical diagnosis of a respiratory dysfunction likely to interfere with his/her ability to control and safely operate a school bus?			
6.have a current clinical diagnosis of high blood pressure likely to interfere with his/her ability to control and safely operate a school bus?			
7.have an established medical history or clinical diagnosis of rheumatic, arthritic, orthopedic, muscular, neuromuscular, or vascular disease which interferes with his/her ability to control and safely operate a school bus?			
8.have an established medical history or clinical diagnosis of epilepsy or any other condition which is likely to cause loss of consciousness or any loss of ability to control and safely operate a school bus?			
9.have a mental, nervous, organic, or functional disease or psychiatric disorder likely to interfere with his/her ability to control and safely operate a school bus?			
10.have a distance visual acuity of less than 20/40 (Snellen) in each eye without corrective lenses or visual acuity separately corrected to 20/40 (Snellen) or better with corrective lenses, distant binocular acuity of at least 20/40 (Snellen) in both eyes with or without corrective lenses, field of vision of at least 70 degrees in the horizontal meridian in each eye, and the ability to recognize the colors of traffic signals and devices showing standard red, green, and amber?			

Does the school bus driver named in Section I above.....

Revised November 2018