The Kilgore College Transportation Institute trains individuals who are either new to the field of commercial driving or experienced drivers who need to enhance or reinforce skills.

The student selects one of two areas of study:

- **Commercial Driver’s License (CDL) Class “A”**
  - $4,500.00
  - For individuals new to the transportation industry. Five-week program, Monday – Friday, 8:00 am – 5:00 pm.

- **Fast Track CDL**
  - $4,000.00
  - For individuals who have a Commercial Learner’s Permit and need current driving hours and a vehicle in order to take the driving test. Four-week program, Monday – Friday, 8:00 am – 5:00 pm.

  **Student is responsible for permit and license fees**

**Admission Requirements**

- Registration Form
- 18 years old minimum age to obtain a CDL.
- Copy of clean driving record obtained through the Texas DPS office with 10 years of driving history.
- DOT (Department of Transportation) Physical with medical card.

**Location of Training:** Whitten Applied Technology Center
1306 N. Henderson Blvd. Kilgore, TX 75662

Payment is due at the time of registration. These courses are not eligible for financial aid through Kilgore College.

**Contact Information:** Kilgore College Workforce Development-Continuing Education
Physical Address: Whitten Applied Technology Center, 1306 S. Henderson Blvd.,
Kilgore TX,
Room 109
Telephone: 903-988-7452
Email: cdl@kilgore.edu
Fax: 903-983-8132

**Suggested material for the class:**
Safety Glasses
Work Gloves
Flash Light
Rain Gear

Registration will be accepted only if class space is available when it is received. Payment is due at on the first day of class.
Kilgore College Course Registration Form

Date: ____________________________

SS#: ___________________ - ____________ - ____________

In order to help us protect your Social Security number, the college computer system will convert your SS# into your student ID# for your record.

Student ID #: ___________________ - ___________________

Name: ___________________________ (Last Name)  (First Name)  (Middle Initial)

Mailing Address: ____________________ County: ______________

City: ____________________ State: _____  Zip: ____________

Home Phone: (____) __________ - ________  Business or Cell Phone: (____) __________ - ________

Email: ____________________________

Date of Birth: _________/_______/_______

Gender: _____ Male _____ Female

Colleges and universities are asked by many, including the federal government, accrediting associations, college guides, newspapers and our own college/university communities, to describe the racial/ethnic backgrounds of our students and employees. In order to respond to these requests, we ask you to answer the following two questions:

1. Are you Hispanic or Latino? (Are you a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race?)
   - Yes
   - No

2. Please select the racial category or categories with which you most closely identify. Check as many as apply:
   - _____ American Indian or Alaska Native
   - _____ Asian
   - _____ Black or African American
   - _____ Native Hawaiian or Other Pacific Islander
   - _____ White

Party responsible for payment: Self _____  TWC _____  VA _____  Other _____

This section for CDL Candidates only

Does your driving record prevent you from getting a Class “A” license? Check with DPS. If so, this will eliminate you from the Transportation Certificate.

DL# __________________ State ______________

Current Type of License: ________  Current CDL Permit: ___Yes ___ No  Endorsements: ___Yes ___No

If you answered Yes to Endorsements, please list: ______________________________________________________

If convicted of a Felony or Misdemeanor? ____ Yes ____ No  If yes, please give dates and explain:

__________________________________________________________________________________________

__________________________________________________________________________________________

__________________________________________________________________________________________

Course Name  Course Number  Start Date  Tuition

Course Name  Course Number  Start Date  Tuition
Kilgore College Course Registration Form

Kilgore College~ Release of Liability

If student is under 18, parent or legal guardian must sign this form for student to participate in Service Learning.

RELEASE OF LIABILITY FOR

(Student Name)                                   (Student ID / TCLEOSE PID number)

I, _______________________________________, a student of Kilgore College, hereby acknowledge that I freely and voluntarily have registered for the following course, __________ KCTI ______________ (referred to herein as the “Course”), for the dates _______ - ___________ at Kilgore College. The term College also includes its trustees, employees, agents and assigns.

I understand that Off-Campus activities included in the course are structured to enhance my educational experience in ways not available through study solely on the College Campus. I fully understand and agree that certain elements of the Course, including the Off-Campus Activities, are physically ad emotionally demanding and that by participating in the Off-Campus Activities in a locale(s) not under the control of College, there are risks of accidental or other physical or emotional injury. These risks may include, but are not limited to, loss or damage to personal property injury or death due to (1) travel to and from the Off-Campus Activities, (2) the condition of facilities where the Off-Campus Activities will occur which are not under the control and maintenance of College, and/or (3) potential criminal activity in the area of the Off-Campus Activities, among others. I agree to advise the Course instructor at any point when I question my ability to participate in any activity related to the Course.

I have fully investigated the nature of the Course and the Off-Campus Activities and I understand and assume the risks of my participation in them. I further represent that I do not possess, nor am I aware of, any physical or mental disabilities which will limit my participation in the Off-Campus Activities, or that I have asked for and received reasonable accommodation, allowing me to participate in the Course and the Off-Campus Activities.

I EXPRESSLY AGREE AND INTEND THAT MY PARTICIPATION IN THE OFF-CAMPUS ACTIVITIES SHALL BE UNDERTAKEN BY ME AT MY OWN RISK AND THAT THE COLLEGE SHALL NOT BE LIABLE FOR ANY INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS, OR CAUSES OF ACTION WHATSOEVER WHICH MAY ARISE OUT OF OR IN CONNECTION WITH MY PARTICIPATION IN THE OFF-CAMPUS ACTIVITIES, WHETHER FROM ACTS OF ACTIVE OR PASSIVE NEGLIGENCE ON MY PART, OR THE PART OF THE COLLEGE FOR ANY SUCH INJURIES, DAMAGES, CLAIMS, DEMANDS, ACTIONS OR CAUSES OF ACTION.

IN EXCHANGE FOR MY PARTICIPATION IN THIS COURSE, IT IS, THEREFORE, MY SPECIFIC EXPRESS INTENT THAT IN THE EVENT THAT THE COLLEGE SHOULD CAUSE, EITHER DIRECTLY OR INDIRECTLY, LOSS, DESTRUCTION (INCLUDING DEATH), LIABILITY, OR CLAIMS AGAINST ME AS A RESULT OF INTENTIONAL CONDUCT, NEGLIGENCE OR OTHERWISE, I WILL HOLD THE COLLEGE HARMLESS AND INDEMNIFY THE COLLEGE FROM ANY AND ALL OBLIGATIONS, LIABILITIES, CAUSES OF ACTION, LAWSUITS, DAMAGES AND ASSESSMENTS, INCLUDING LEGAL FEES AND COSTS, THAT RESULT FROM THE COLLEGE’S INTENTIONAL ACTIONS OR NEGLIGENCE.

THE TERMS OF THIS RELEASE OF LIABILITY ARE TO BE GOVERNED BY AND CONSTRUED UNDER THE LAWS OF THE STATE OF TEXAS. SHOULD ANY TERM OR PROVISION OF THIS RELEASE OF LIABILITY BE FOUND TO BE UNENFORCEABLE TO THE MAXIMUM EXTENT PERMITTED BY LAW, THE BALANCE OF THIS RELEASE OF LIABILITY SHALL REMAIN IN FULL FORCE AND EFFECT. I AGREE THAT EXCLUSIVE VENUE FOR ANY DISPUTE ARISING BETWEEN THE COLLEGE AND ME INVOLVING THIS RELEASE OF LIABILITY IN ANY WAY SHALL BE IN GREGG COUNTY, TEXAS.

ACCEPTED AND AGREED:

By: ____________________________________________ Date: __________________

(Signature of student or parent/guardian)

Phone: __________________________

Printed Name

Address ___________________ City __________ State __________ Zip Code __________
I _____________________________ understand that there is a difference between having a clean driving record and my driving history. If my driving record is clean and I take and pass all the required tests, I can receive a Class “A” CDL license.

I _____________________________ also understand that driving history can prevent getting employment because an employer may check driving history before offering a position.

____________________________  ______________________________
Signature                    Date

____________________________  ______________________________
Witness       Date
MUST HAVE

DOCUMENT CHECKLIST ON FIRST DAY OF CLASS

** This paperwork will needed when signing up for your permit at the DMV **

- **1- PROOF OF US CITIZENSHIP**
  “Original” Birth Certificate or “Certified” copy
  Valid, unexpired passport

- **1- PROOF OF IDENTITY**
  Texas Driver License

- **1- PROOF OF SOCIAL SECURITY NUMBER**
  SS Card
  Pay stub with SS # and name
  W-2

- **2- PROOFS OF RESIDENCY**
  Rental Lease/Mortgage
  Utility Bill (recent) no cell phone bill
  Medical or Health Card
  Valid Texas Registration (voter, auto, boat)
  Bank Statements

- **TEXAS VEHICLE REGISTRATION AND PROOF OF INSURANCE**
  There are more types of specific documentation that can be used in place of the ones mentioned above for military personnel and citizens not born in the U.S.

Please note that all of these documents MUST be ORIGINAL. The documents MUST have YOUR name on them.

YES, other documents can be used. Please notify instructor if you are having an issue locating these specified documents and we can explore the options.

ELIZABETH LEAMON 903-431-0303 eleamon@kilgore.edu