## **OHIO PRESERVICE ELDT BUS DRIVER CERTIFICATION AFFIDAVIT**

## Please complete the following information and email this form to your Preservice Instructor.

## please print

	I certify that I will comply with all U.S Department of Transportation regulations in parts 40, §382,	§383
	and §391, as well Ohio and/or local laws, related to alcohol and controlled substances testing, age	2,
	medical certification, licensing, and driving record checks as required in §380.707(a).	
Driv	ver's Name: Date:	
Driv	ver's Signature:	
	I certify that I am a certified behind-the-wheel instructor as defined in §380.605. I certify that I have	
	conducted the required training for this trainee to be in accordance with ELDT requirements, Ohic	
	Revised Code, and Ohio Preservice School Bus Driver Training Manual. I have found the trainee to	be
	competent to operate a school bus.	
OBI	I Name: Date:	
OBI	I Signature:	
	I certify that the above named OBI is authorized on behalf of (name of school district or employer	.)
	To conduct behind-the-wheel training for the trainee listed above. All training documents related	, to
	this trainee will be on file at the bus owner's facility for a period not less than 6 years.	
Nam	me of Administrator: Date:	
Tran	nsportation Administrator's Signature:	

A copy of OBI's driver's license is attached to this form per §380.725(b)(3).