

JESSE WHITE, SECRETARY OF STATE

SCHEDULE 1 - PERSONAL HISTORY OF DRIVER TRAINING SCHOOL OWNER OR MANAGER

(PLEASE PRINT OR TYPE)

(This form must be completed by all owners, partners, associates, corporate directors, officers and managers and attached to the "Driver Training School Application for License.")

GENERAL

Name of owner, partner, associate, corporate director, officer or manager			Last	First	Middle	Date of Application			
						Mo.	Day	Yr.	
Home Address				City		State		ZIP	
Home Phone		Social Security No.		Current Illinois Driver's License No.			Expiration Date		
							Mo.	Day	Yr.
Name of Driver Training School you own or manage				Address of School		No.	Street	City	
Place of Birth				City		State			
Height	Weight	Color of Eyes		Color of Hair		Sex	Date of Birth		
							Mo.	Day	Yr.
Name of Spouse or Nearest Relative				Address of Spouse or nearest Relative					

EDUCATION

Education, (circle highest grade completed)						
Grade School		High School		GED	Other	College
1 2 3 4 5 6 7 8		9 10 11 12				1 2 3 4 5 6
Have you successfully completed a course in driver education at an accredited college or university (If answered "yes," complete the following space.)						
				<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Name of College or University		Hours	Date Completed		Instructor's Name	
			Mo.	Day	Yr.	

EMPLOYMENT

List employment experience for last 5 years, (most recent, first-do not include current employment in a driver training school)	Name of Firm		Address of Firm			
	Kind of Work		Dates Employed		Reason for leaving	
			From	To		
	Name of Firm		Address of Firm			
	Kind of Work		Dates Employed		Reason for leaving	
			From	To		
Name of Firm		Address of Firm				
Kind of Work		Dates Employed		Reason for leaving		
		From	To			

QUESTIONS

You must answer each of the following questions "yes" or "no." All questions answered "yes" must be explained in the explanation area provided on this application.

1. Have you ever been known by any name other than the one shown on this personal history?	
2. Have you ever been convicted of a felony?	
3. Have you ever been convicted of manslaughter?	
4. Have you ever been convicted of reckless homicide?	
5. Have you ever been convicted of driving under the influence of intoxicating liquors?	
6. Have you ever been convicted of driving under the influence of narcotics?	
7. Have you ever been convicted of leaving the scene of a traffic accident involving death or personal injury?	
8. Have you ever been convicted of perjury or making of any false statement relating to any portion of the Illinois Vehicle Code?	
9. Have you ever been convicted of any traffic violations other than parking violations?	
10. Have you ever been convicted of any crime involving moral turpitude?	
11. Have you ever been convicted of any misdemeanor other than traffic violations?	
12. Are you now involved with any charges or court proceedings relating to the matters stated in questions 2, 3, 4, 5, 6, 7, 8, 9, 10 or 11?	
13. Has your license to drive in Illinois or any other state ever been refused, cancelled, suspended, disqualified or revoked?	
14. Has your driver training school instructor's license even been denied, cancelled, suspended, disqualified or revoked?	
15. Do you have any financial interest in or are you employed by any automobile agency engaged in the business of selling new or used vehicles?	
16. Are there any motor vehicle accident judgments against you as yet unsatisfied?	
17. Have you given driver training instruction for compensation within the past 12 months?	

Explanations of the previous questions answered "yes."

Any material change affecting the answers or statements in this schedule must be reported within 20 days to the Commercial Driver Training Section, Office of the Secretary of State, 650 Roppolo Drive, Elk Grove Village, IL 60007.

I hereby affirm my understanding that it is a violation of the Illinois Vehicle Code for an individual to make false application or affidavit, to swear or affirm falsely, or to display or present any documentation that is fictitious or has been unlawfully altered, for the purposes of making application for a commercial driving school owner or manager. I further affirm that all information set forth in the foregoing schedule is true and correct. I also hereby affirm that as a owner/manager, I have been fingerprinted in accordance with the rules and regulations of the Illinois Vehicle Code.

Applicant's Signature _____

To knowingly make a false statement or conceal a material fact in this application is a criminal offense and may result in the revocation of your driver training school license.

WHEN YOU HAVE COMPLETED THIS SCHEDULE, ATTACH IT TO THE
DRIVER TRAINING SCHOOL APPLICATION