

## **Arizona Department of Public Safety** Student Transportation Unit 2102 W. Encanto Blvd / PO Box 6638 MD 1250

Pho e nix, AZ 85005

Phone: (602)223-2646 Fax: (602)223-2923

 $We\ b\ site:\ http://\ stude\ n\ ttra\ n\ sp\ o\ rta\ tio\ n.\ a\ zd\ p\ s.g\ o\ v \qquad -\qquad Em\ a\ il:\ sc\ ho\ o\ lb\ u\ s@\ a\ zd\ p\ s.g\ o\ v$ 

NEW DRIVER CERTIFICATION COVER SHEET						
PHASE A						
All Fields Required						
Applicant Name  Last		 First				MI
District/Employer				•		
District/Employer N	lumber					
Transportation Dep	t. Phone #					
Contact Person			Email			
County						
This cover sheet <u>must</u> be completed and submitted with the following items:						
Application for School Bus Driver's Certificate*						
Student Transportation fingerprint card and envelope						
\$22 fingerprint card processing fee						
(payable to <u>Department of Public Safety</u> by only school revolving account check,						
-OR-	cashier's chec	ck, or money order)				
Copy of Current and Employer Verified Arizona DPS Fingerprint Clearance Card						
Verified both visually and at <a href="http://webapps.azdps.gov/public inq">http://webapps.azdps.gov/public inq acct/acct/ShowClearanceCardStatus.action</a>						
Card Number			Expiration Date			
Employer Verification of Fingerprint Clearance Card						
Printed Name				Sign	nature	
* Form found at <a href="http://studenttransportation.azdps.gov/">http://studenttransportation.azdps.gov/</a> Date Notations By Student Transportation Unit Only						
	Date NO	tations by olducin	Παποροι	tation offic of		
Received	Subm	itted to AZAFIS	Returned	I from AZAFIS	Phase A (	Completed
			Backgrou	and Acceptable:	Vec	No