CERTIFICATION OF EMPLOYMENT, SELF-EMPLOYMENT OR SCHOOL ATTENDANCE

**INSTRUCTIONS:** If you are employed, your employer must complete Sections 1, 2 and 3.
If you are self-employed, you must complete Sections 1, 2 and 4.
If you are attending school, the administrator must complete Sections 1, 2 and 5.

### 1. APPLICANT INFORMATION

<table>
<thead>
<tr>
<th>Applicant's Name</th>
<th>Employer's Business/School Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth</td>
<td>Employer's/School Address</td>
</tr>
<tr>
<td>Social Security Number</td>
<td>Driver License Number</td>
</tr>
</tbody>
</table>

### 2. EMPLOYER / SCHOOL INFORMATION

<table>
<thead>
<tr>
<th>Employer's Business/School Name</th>
<th>Employer's/School Address</th>
</tr>
</thead>
</table>

### 3. IF YOU ARE EMPLOYED, HAVE YOUR EMPLOYER COMPLETE THE FOLLOWING:

Explain why a driver's license is necessary for this employee to engage in gainful employment with your business.

Weekly Work Days (Specify) Mandatory

Working Hours (AM / PM, Specify) Mandatory

### 4. IF YOU ARE SELF-EMPLOYED, COMPLETE THE FOLLOWING

Briefly state why a driver's license is necessary in order to operate your business.

Your Work Days (Specify) Mandatory

Working Hours (AM / PM, Specify) Mandatory

### 5. IF ATTENDING SCHOOL, HAVE A SCHOOL ADMINISTRATOR COMPLETE THE FOLLOWING:

Briefly state why a driver's license is necessary in order for applicant to attend school.

Weekly Class Days (attach separate sheet if necessary)

Class Hours (AM / PM, attach separate sheet if necessary)

I hereby swear or affirm that the information given herein is true and correct to the best of my knowledge and that a driver’s license is required to engage in gainful employment or to attend school.

Signature of Applicant

Date

Signature of Employer/School Administrator (If Applicable)

Date

Title of Employer/School Administrator

**Distribution** WHITE to Department, YELLOW to Applicant