



VALLEY SCHOOL DISTRICT #070 BUS DRIVER FMCSA REGISTRATION ACKNOWLEDGEMENT

I, _____, understand that I will need to create an account or have a previous registration with the Federal Motor Carrier Safety Administration Clearinghouse **prior** to beginning a driving route.

_____ I already have a previous registration with FMCSA

_____ I need to create an account. (Please visit www.clearinghouse.fmcsa.dot.gov/register)

Please notify the VL Transport Supervisor once registration has been completed

Applicant Signature

Date