



**Call: 541-440-4668  
for more info  
on CDL Program**

Classes are held Monday – Friday from 7:00 am – 3:30 pm. Some classes start at 6:00 am if a long drive is scheduled. The 3<sup>rd</sup> Thursday of class is a night drive.

Occasional weekend classes are scheduled that include 3 weeknights (Wed – Fri, prior to the 1<sup>st</sup> weekend)

*Testing will take place the week following the last class date on Mon, Tues or Wednesday.*

CWT is the Community and workforce Training Building on the UCC Campus.

## 2021 SCHEDULE:

**May 17 – June 11**

M – F 7:00am – 3:30pm

**July 5 – July 30**

M – F 7:00am – 3:30pm

**Aug 16 – Sept 10**

M – F 7:00am – 3:30pm

**Sept 8 – Nov 13 (NIGHT/WEEKEND)**

W - F (8<sup>th</sup> – 10<sup>th</sup> only) 5:00pm – 9:00pm

S – U 7:00am – 3:30pm

**Sept 27 – Oct 22**

M – F 7:00am – 3:30pm

**Nov 3 – Dec 3**

M – F 7:00am – 3:30pm

**Jan 10 – Feb 4, 2022**

M – F 7:00am – 3:30pm

All potential truck students must go over the CDL packet with a member of the CWT office. You are encouraged to contact the coordinator, **Susan Neeman**, once the packet has been filled out and again about 3 weeks prior to the beginning of class to ensure that all necessary documents have been received.

To schedule an appointment to go over your packet or if you have questions regarding the program please visit:

<https://calendly.com/susan-neeman/cdl-informational-session>

# Umpqua Community College

## CDL Program Cost –2020 – 2021

<b>UCC CDL Program</b>	<b>Total Costs</b>
Non – Credit Fees UCC – March 2020 to June	\$3,999.00
Credit Tuition and Fee	\$4,561.00
Copy of Oregon Driving Record DMV	\$3.00
If other state than Oregon in past 5 years order those as well	\$?.??
DOT Physical – either Urgent Care, check prices	\$160.00
DOT Drug Screen (within 15 days of class)	\$60.00
CDL <u>Class A</u> Instructional Permit	\$23.50
<u>General Knowledge Test (required)</u>	\$10.00
<u>Airbrakes Test (required)</u>	\$10.00
<u>Combination Vehicle (required) no charge</u>	\$ N/C
Doubles\Triples (optional)	
Tanker (optional)	
<u>Have for first week of class; leather gloves, closed toed shoes or boots, retroflective vest</u>	<u>\$ prices vary</u>
CDL License paid at DMV	\$75.50
Administrative Fee for third Party Tester Pd at DMV	\$40.00
CDL Drive Test 3 <sup>rd</sup> Party Tester fee \$185.00 have in had test day	\$185.00
Approx. total from \$4,566 - \$5,128	

Funding may be available from So Coast Business, Voc Rehab, JOBS, or other agencies. Some of those may also cover the other costs as well.

All prices are subject to change without notice

Most classes are held M – F, 7am – 3:30pm. Some day’s classes start at 6am if there is a long drive scheduled. The 3<sup>rd</sup> Thursday of class is the night drive. Ask for more details.

The class is held at the I-5, 113 off ramp. You will see the school off to the west when you get off the freeway.

Fill out all paperwork in this packet and return to the community and Workforce Training Building on the UCC campus. Come to an information session on either Tuesday at 2pm or Thursday at 9am. If you have additional question please call 541-440-4668

**Application for Umpqua Community College  
Commercial Truck Driving Course**

Office Use Date received _____ Funder _____
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\_\_\_\_\_  
Last Name                      First Name                      Middle Initial                      Previous Last Name                      date of birth

\_\_\_\_\_  
UCC Student ID#                      Oregon Driver License Number                      Date Issued                      Male      Female

\_\_\_\_\_  
Current Mailing address                      City                      State                      Zip

\_\_\_\_\_  
Physical address if different from mailing address                      City                      State                      Zip

\_\_\_\_\_  
Cell phone                      other phone                      Email Address

Have you had any previous truck driving experience?    Yes \_\_\_\_\_ No \_\_\_\_\_ If yes please explain below:

\_\_\_\_\_  
\_\_\_\_\_

\*Have you had any driving accidents in the last three years?    Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list how many, when and type of violation

\_\_\_\_\_  
\_\_\_\_\_

\*Have you had any moving violations in the last five years?    Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list how many, when and type of violation

\_\_\_\_\_  
\_\_\_\_\_

\*Have you had any alcohol related violations? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list dates.

\_\_\_\_\_  
\_\_\_\_\_

\*Have you ever been convicted of a misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, provide explanation and dates

\_\_\_\_\_  
\_\_\_\_\_

\*Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, provide explanation and dates

\_\_\_\_\_  
\_\_\_\_\_

\*Have you ever lost your driving privileges or had a restricted driving license in the past ten years?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list dates

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Are you presently employed? Yes \_\_\_ No \_\_\_ If yes, who are you employed with? \_\_\_\_\_  
If no, when were you last employed? \_\_\_\_\_

Please indicate the term or date for which you would like to attend: (See sheet included for class dates)  
Summer \_\_\_\_\_ Fall \_\_\_\_\_ Winter \_\_\_\_\_ Spring \_\_\_\_\_

**Your application will not be accepted unless a Certified Court Print of your Driving Record from the Department of Motor Vehicles for the past five years is attached.**

I have read and understand the conditions for acceptance into the Commercial Truck Driving Program. I understand that any misleading or false information in my application or interview(s) may result in my termination from the program (see preregistration and Withdrawal/Drop policy). I agree to finish all of the items listed below as scheduled:

- Take a UCC Compass test at least one week prior to the start of the course
- Obtain a DOT physical Examination at least two weeks prior to the start of the course
- Obtain an Oregon Class A driving permit. Must hold a Class B or C driver license and have had the license for at least one year
- Obtain a DOT drug screen one week prior to the start of the class you will be attending

I have no physical restrictions or limitations that would interfere with my ability to prepare for the Commercial Driver License Exam or that would restrict my opportunities for employment as a professional truck driver.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

\*Does not necessarily disqualify applicant

## Employment History

Name: \_\_\_\_\_

Note: List past employment for the past 10 years (Attach separate sheet if needed)

Dates	Company, City, State	Contact & Phone
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____
____ to ____	_____	_____

Applicant Signature \_\_\_\_\_

Date: \_\_\_\_\_

## Drug Screening Policy

Federal regulations require Commercial Truck Driving Programs in public schools to participate in DOT drug screening. The statute requires that all persons driving a commercial vehicle, whether licensed / permit or employed / student, must pass a DOT drug screening and be subjected to random drug and alcohol testing during their training or employment.

Under this regulation, all applicants to the Umpqua Community College Truck Driving Program will be required to pass a DOT (Pre-employment) drug screen within 30 days before starting the training, and be prepared for random testing during the road training period.

Applicants may obtain their drug screening at:

Evergreen Family Medicine  
OccuHealth  
2570 NW Edenbower Blvd  
Roseburg, OR 97470  
Phone – 541-677-7477

The cost of a DOT (pre-employment) drug screen is about \$60.00 (subject to change without notice)  
The cost of the DOT physical is about \$110 (subject to change without notice)

Patients must present photo ID and let the receptionist know you are there for the UCC Commercial Truck Driving Program. You will be asked to sign a “Patient Authorization for release of Confidential Drug Screening and/or Alcohol Testing Information and Records” form. This gives the clinic authorization to release the test results directly to UCC. If you have any questions, please contact EFN (OccuHealth) at 541-679-2273.

Our office will be notified of your results and you can get a copy from UCC Commercial Truck Driving Program Coordinator. We will notify you if there is a problem with the drug screen. EFM is qualified to do DOT physicals; you will need to schedule an appointment for the physical. Do not have the drug screen until you have been approved by the CDL program coordinator and your funding agency (if you have one). Physical can be scheduled at any time and must be completed before a CDL permit can be issued by DMV. Drug screen should be completed 5 – 10 days prior to the start of class.

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**Applicant Signature**

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**Date**

If you have any questions, please do not hesitate to call the CDL program Coordinator, Judy Ode, at Umpqua Community College, 541-440-7691.



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*Serving Douglas County Since 1964*

### **Consent and Release to Photograph/Record**

I hereby authorize Umpqua Community College, its District, Board of Education and its employees (UCC), or persons hired by UCC to photograph, record, tape, film or electronically capture in permanent form my name, likeness, image, voice, biographical and personal information, appearance and/or performance, and/or further to use and publish my writing(s) (collective work). I further grant UCC full permission to edit my writings and the original footage, data, voice or image as shall be deemed necessary; that the work and my name may be used, published and distributed without remuneration to me in whole or in part for educational, instructional or promotional purposes in print or over open broadcast, cable, audio-visual, radio, closed-circuit exhibition, computer like, or other medium for college purposes as deemed appropriate by UCC in perpetuity, throughout the world.

For these purposes, I waive and relinquish my personal rights, privacy rights and rights under the Family Education Rights, Privacy Act and student record law of the state of Oregon. I hereby waive all right to any claim for royalties or other payments. Said work and all components thereof shall become the property of UCC and maybe be copyrighted in its own name or a name of its choosing.

I also release UCC from any and all claims of libel, slander, invasion of privacy or other claims based on my appearance and/or performance of use of the recording of such and agree to hold UCC harmless from any and all claims by the Third Parties, including any claim based on allegation of copyright infringement from my appearance and/or performance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: (please print) \_\_\_\_\_

Address: \_\_\_\_\_

Below to be completed by parent or legal guardian if under 18. I represent that I am the parent or guardian of the above-named minor and have authority to execute the release above. I hereby consent to the foregoing on behalf of the above-named minor

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

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## UCC Authorization for Release of Information

TO OUR STUDENTS AND FUTURE STUDENTS: We can help you better if we are able to work with other agencies that know you and your family. By signing this form you are giving permission for these organizations to share information about your situation.

PURPOSE: The information received will be used to evaluate my situation and to plan for and coordinate services for me, or other purposes specified below:

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This permission expires two years from the date this document is signed.

TO THOSE RECEIVING INFORMATION: State and Federal law protects this information disclosed to you. You are not authorized to release it to any agency or person not listed on this form, without specific consent of the person to whom it pertains, unless authorized by other laws.

I authorize the following individuals or agencies to provide information to Umpqua Community College:

		Yes No				
Yes	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Employment/Unemployment
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Educational Records
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Employability Assessment
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mental & Physical Limitations
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Driving Record
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Results of Urinalysis
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DOT Physical
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Foundation if applying for a scholarship

Other \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree that the agencies and individuals listed above may share and exchange information about my circumstances.

Yes \_\_\_\_\_ No \_\_\_\_\_

I can cancel this at any time but I understand that the cancellation will not affect any information that was already released before the cancellation. I understand that information about my case is confidential and protected by State and Federal law. I approve the release of this information. I understand what this agreement means. I am signing on my own and have not been pressured to do so.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date





## Member Companies

- [A&M Transport](#)
- [Ireland Trucking](#)
- [Terrain Tamers](#)
- [Whitaker Trucking](#)
- [Roseburg Forest Products](#)
- [Sprinter Trucking](#)

Umpqua Community College is grateful for the support from the Umpqua Valley Transportation Sector Partnership (UVTSP). We encourage all truck applicants to consider employment with one of the local members.

The Umpqua Valley Transportation Sector Partnership (UVTSP) was established to address specific workforce and other competitiveness needs of the transportation industry.

The Umpqua Valley Transportation Sector Partnership (UVTSP) located in Douglas County is using “Next Generation Sector Partnerships” model to promote industry driven, community supported sector partnerships. Businesses from the same industry who are in a shared labor market region define goals and then work with education, workforce development, economic development and community organizations to address workforce and other needs of the defined sector.

The transportation sector in the southern Oregon region is struggling to replace retiring drivers and to attract new people to the profession. Expanding into new markets is impossible for the industry until immediate job openings are filled and long-term solutions are developed and implemented within the transportation sector.



**UMPQUA COMMUNITY COLLEGE**

COMMUNITY AND WORKFORCE TRAINING

1140 Umpqua College Road Roseburg, OR 97470

541.440.4668 [umpqua.edu/cwt](http://umpqua.edu/cwt)

*UCC is an equal opportunity employer and educator.*