



Nova Scotia Professional Driver Training - Student Application

SECTION 1: Student Application Information

Name: _____.

Address _____.

City: _____ Nova Scotia Postal Code: _____.

Phone: _____ Alternate Phone: _____.

Email: _____.

Birth date: _____.

Emergency Contact Name: _____.

Relationship: _____ Phone: _____.

Doctor's Name: _____ Phone: _____.

Do you have any medical conditions/disabilities or allergies which may restrict your participation in training?

No: _____ Yes: (Explain) _____.

_____.

SECTION 2: Student Education and Experience

Highschool Name: _____ Highest Grade Completed: _____ Year: _____

City: _____ Country: _____

Post Secondary: _____ Credential: _____ Year _____

SECTION 3: THRSC Screening Results:

Students applying for Class 1 Professional Driver Training must contact THRSC for a screening appointment.

_____.

_____.



SECTION 4: Program Information

Applications using this application form are applying to: Class 1 Professional Driver with Internship
This program is 480 hours /12 (4 Weeks Theory + 4 Weeks Truck + 4 Weeks Internship)

Tuition: \$10,750.00*

A \$200 Non-refundable application fee is required at the time of application and will be deducted from tuition).

Applications will NOT be considered for scheduling until all prerequisites have been submitted:

1. Valid Nova Scotia Master (Driver's License) #: _____
2. Current Class of License: _____ Expiry Date: _____
3. Air Brake Endorsement: Yes _____ No: _____
4. Class 1 Knowledge Test Passed Yes _____ No: _____
5. Road Test Receipt (Purchased at Access Nova Scotia) Yes _____ No: _____
6. Drivers Medical (within 30 days of application) Yes _____ No: _____
7. Drivers Vision Exam Report Yes _____ No: _____
8. Letter of Intent for Internship Yes _____ No: _____
9. Funding Confirmation Letter Yes _____ No: _____
10. Current Criminal Record Check (within 30 days of application): Yes _____ No: _____
11. I have driven a car with a standard transmission: Yes _____ No: _____

I have confirmed I have Funding with: (Please indicate amounts)

Employment Nova Scotia \$ _____ Workers Compensation \$ _____

Student Loan \$ _____ Other Funder \$ _____

Funder Contact Name: _____ Phone: _____

Funder Email: _____



SECTION 5: Driver Trainee Awareness

- Drivers taking Insulin by injection are **NOT** permitted to drive a Commercial Transport in the United States.
- All Felony convictions will result in a Driver **NOT** being permitted to enter the United States unless you have received a Pardon from the United States government.
- Drivers must be Twenty-One (21) years of age to operate a Commercial Transport vehicle in the United States.
- In Canada the age varies by province. In Nova Scotia you must be Nineteen (19) years of age.

SECTION 6: Policy Acknowledgement

All Driver Training students must sign a student applicant declaration prior to scheduling indicating they have read Taylor Pro College policies including:

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|----------------------------------|---|
| • Admission Policy | • Laptop Loaner Agreement and Acceptable Use Policy |
| • Attendance Policy | • Privacy and Distribution Policy |
| • Bullying and Harassment Policy | • Risk Assessment Policy |
| • Complaint Resolution Policy | • Tuition Refund Policy |
| • Dismissal and Drug Policy | |

SECTION 7: Signature and Agreement

I understand that I must always have my valid Nova Scotia Driver’s License with Air Brake Endorsement in my possession, during all in-vehicle training.

I understand that I must give 24 hours’ notice if I am unable to attend a scheduled lesson. Failure to provide adequate notice will result in those training hours being forfeited.

By signing below, I confirm the information contained within this application is accurate.

Student Signature: _____ Date _____

Student Name (PLEASE PRINT): _____

Institution Representative Signature _____ Date _____