

CDL Re-Examination Certificate (DTS-E)

Purpose: Use this document as a guide for completing the Virginia Driver Training Re-examination Certificate.(DTS-E)

NOTE: The Virginia Driver Training Re-examination Certificate is a three-part form. The Driver Training School (DTS) must print firmly to complete forms so all 3 copies are legible.

STUDENT INFORMATION	
1. FULL LEGAL NAME:	Full legal name; no nicknames or abbreviations.
2. BIRTHDATE:	Date of birth (example: 07/11/1991).
3. CUSTOMER NUMBER	Driver identification number from the student's ID card or driver's license.

COURSE TYPE COMPLETED	
1. CLASSROOM COURSE:	Check the box which indicates which classroom course student successfully completed.
2. IN-VEHICLE COURSE	Check the box which indicates which in-vehicle course student successfully completed.

SCHOOL INFORMATION	
CLASSROOM COURSE	
1. CHECK BOX:	Check the box if student is taking classroom course.
2. SCHOOL TYPE:	Check type of school that provided the classroom instruction.
3. SCHOOL NAME:	Name of Driver Training School or Virginia Community College that conducted the 40 hour classroom component of driver education course.
4. SCHOOL CODE:	The 7-digit CDL DMV number assigned to the school that conducted the classroom component of CDL driver education course.
5. DATE COMPLETED:	Date student successfully completed the classroom course.
6. INSTRUCTOR LICENSE NUMBER:	Number from instructor's valid license to teach.
7. INSTRUCTOR FULL LEGAL NAME:	Instructor prints full legal name; no nicknames or abbreviations.
8. INSTRUCTOR SIGNATURE:	Instructor signs to acknowledge classroom course completion.
9. DATE:	Date instructor signs certificate.

IN-VEHICLE COURSE	
1. CHECK BOX:	Check box if student is taking in-vehicle training.
2. SCHOOL NAME:	Name of Driver Training School or Virginia Community College that conducted the 80 hour in-vehicle component of driver education course.
3. SCHOOL CODE:	The 7-digit DMV number assigned to school.
4. DATE COMPLETED:	Date student successfully completed in-vehicle instructional periods.
5. INSTRUCTOR LICENSE NUMBER:	Number from instructor's valid license to teach.
6. INSTRUCTOR FULL LEGAL NAME:	Instructor prints full legal name; no nicknames or abbreviations.
7. INSTRUCTOR SIGNATURE:	Instructor signs to acknowledge in-vehicle course completion.
8. DATE:	Date instructor signs certificate.

CERTIFICATE RECEIPT SIGNATURE	
1. STUDENT SIGNATURE:	Student signs to acknowledge receipt of Re-examination Certificate.
2. DATE:	Date student signs certificate.

AFTER STUDENT COMPLETES COURSE	
1.	Issue DMV Copy of certificate to the student.
2.	Instruct student to take certificate to any DMV customer service center as proof of successful completion of the classroom or in-vehicle training. DMV will conduct written and/or road skills test.
3.	File School Copy of certificate in student file.

QUESTIONS	
Contact the DMV Commercial Licensing Work Center at (804) 367-7050.	