

**Texas Department of Criminal Justice  
Commercial Driver Certification/Notification and  
Receipt of Materials Form**

Commercial Driver's Name: \_\_\_\_\_  
Last First MI

Commercial Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Employee Commercial Driver's Month/Date of Birth or Offender Driver's ID#: \_\_\_\_\_  
(mm/dd) Position Title: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_  
Last First MI Supervisor's Month/Date of Birth: \_\_\_\_\_  
(mm/dd)

Work Location/Unit: \_\_\_\_\_ Work Phone/Ext.: \_\_\_\_\_

**To Be Completed By The Commercial Driver**

As required by the Federal Highway Administration regulations, the TDCJ shall identify employees and offenders who have a commercial driver license (CDL) and who operate a commercial vehicle for the TDCJ. A commercial motor vehicle is defined in your Commercial Driver Information Packet. Please check the appropriate answers to the questions listed below.

1. Do you have a commercial driver license? Yes  No
2. Do you operate a commercial motor vehicle for the Texas Department of Criminal Justice on any occasion? Yes  No

If you have answered "yes" to both questions listed above, you are subject to alcohol and drug testing as described in 49 CFR Part 382, issued by the Federal Highway Administration. The alcohol and drug testing categories consist of: (1) Pre-employment Testing; (2) Post-Accident Testing; (3) Reasonable Suspicion Testing; (4) Random Testing; (5) Return to Duty Testing; and (6) Follow-up Testing. If you have answered "yes" to only one question, you are not subject to alcohol and drug testing.

I acknowledge that I have been notified that I am subject to Alcohol and Drug testing in accordance with 49 CFR Part 382 and that I have received educational materials that relate to the Texas Department of Criminal Justice's implementation of 49 CFR Part 382, Subparts A-F.

I further certify that I *understand* the materials in the Commercial Driver Information Packet.

I understand that if I have any questions concerning the material in the Commercial Driver Information Packet that I should contact my supervisor or the substance control officer (SCO) in Huntsville Human Resources.

\_\_\_\_\_  
*Commercial Driver's Signature*

\_\_\_\_\_  
*Date (MM/DD/YYYY)*

**Note to Employee Commercial Driver: With few exceptions you are entitled upon request: (1) to be informed about the information the TDCJ collects about you; and (2) under Texas Government Code §§ 552.021 and 552.023 to receive and review the collected information. Under Texas Government Code § 559.004, you are also entitled to request in accordance with TDCJ procedures that incorrect information the TDCJ has collected about you be corrected.**

I have reviewed this form and do hereby certify that it is correct.

\_\_\_\_\_  
*Supervisor's Signature*

\_\_\_\_\_  
*Date (MM/DD/YYYY)*

**Forward this form along with a copy of the commercial driver's current driver license to the SCO, Labor Relations Section, Human Resources Division.**