



Earle C. Clements Job Corps Academy

2302 US HWY 60 East
Morganfield, KY 42437
(270) 389-2419
Fax: (270) 389-5359

Thank you for your interest in transferring a student into the Advanced Heavy Truck Driver training program at the Earle C. Clements Job Corps Academy. Students must understand that this skill is very demanding and requires high levels of both maturity and focus. We are always happy to review potential candidates, but they must understand and be willing to accept the responsibility that goes along with driving tractor trailers.

Program inquiries should be directed to Jennifer Kizer (CTT Administrator) kizer.jennifer@jobcorps.org or call at 270-389-5312

Listed below are the documents/requirements to process a Heavy Truck Driving Advanced transfer student:

- a. 18 months of Jobs Corps enrollment available (this includes 12 month extension for Advanced Training)
- b. Completed Heavy Truck Driving application (see page 3-7)
- c. Background screening documentation (see page 9-10)
- d. Recommendations- 2 Professional and 1 Personal (see page 8)
- e. Medical Packet (see page 2)
- e. Applicant must be within 4 weeks of their 21st birthday or older
- f. Have a GED or HSD – copy sufficient for application process
- g. Have a valid driver's license and have at least one year of driving experience – copy sufficient for application process
- h. **Have original birth certificate/certified copy in possession upon arrival** – copy sufficient for application process
- i. **Have original social security card in possession upon arrival** – copy sufficient for application process
- j. If born in a foreign country, you must have either
 - 1) Proof of US citizenship
 - 2) Proper INS documents (at least one of the following):
 - I-94
 - I-688B or I-766
 - Permanent or Resident Alien Card (I-551)
- k. Reading TABE score of 550 or higher
- l. Military service record (DD214), if applicable
- m. All case notes pertaining to the Heavy Truck Driving candidate
- n. Current, up-to-date student profile
- o. Current, up-to-date T.A.R (certifications recommended)
- p. Student Conduct report
- q. MyPace Plan

Please Federal Express all required documentation to Jennifer Kizer at the above address.

Once we receive the application/documentation, the following steps will be taken:

- r. Center Physician and Wellness staff will review medical records
- s. CTT Supervisor will conduct a background check, review documentation, and perform a phone interview
- u. Results will be submitted to the Center Director for final approval

If the student is accepted, travel arrangements will be made through the Records Dept.

I hope this information is beneficial in the transfer process and we hope to hear from you soon.

Earle C Clements Advanced Training Application



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ADVANCED HEAVY TRUCK DRIVING TRAINING APPLICATION

Name: First, Middle, Last		Social Security Number: --- ---		Date: / /	
Former Name:	Home Phone Number: ()		Cell Phone Number: ()		
Email Address:					
Date of Birth:			Age:		
List All addresses at which you have lived in the previous seven (7) years					
Street Address	City	State	Zip Code	To	From
Present Address					
Previous Address					
Previous Address					
Previous Address					
Previous Address					

Education		
School Information	Graduate (Yes or No)	Major
High School:		
Technical:		
College:		
College:		
Other:		



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Certifications Held:		
Military Record		
Have you ever served in the US Military or Armed Forces?		If YES, What Branch?
Primary Specialty:	Rank at Discharge:	Type of Discharge:
Employment		
Former Employer		
Hire Date (Month/Year):		Separated Date (Month/Year):
Company Name:		
Address:		
City:	State:	Zip:
Phone:	Supervisor:	
Position:	Rate of Pay:	
Reason for leaving:		
Former Employer		
Hire Date (Month/Year):		Separated Date (Month/Year):
Company Name:		
Address:		
City:	State:	Zip:
Phone:	Supervisor:	
Position:	Rate of Pay:	



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Reason for leaving:		
Former Employer		
Hire Date (Month/Year):		Separated Date (Month/Year):
Company Name:		
Address:		
City:	State:	Zip:
Phone:	Supervisor:	
Position:	Rate of Pay:	
Reason for leaving:		

Drivers License		
Do you currently have a valid driver's license?		
If Yes, Name as it appears on license:	State of Issue:	Expiration Date:
If No, Reason:		

Criminal Background	
Are there charges currently PENDING against you for a crime other than a minor traffic infraction?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been CONVICTED, PLED GUILTY , or Nolo Contendere (NO CONTEST) to a crime?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been ARRESTED for a crime involving drugs, controlled substances, or alcohol?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No



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If you have answered Yes to any of the above questions
please complete the following section

Criminal Background Continued

1st Offense

Offense:

☐ Felony

☐ Misdemeanor

Arrest Date:

City:

County:

State:

Penalty:

2nd Offense

Offense:

☐ Felony

☐ Misdemeanor

Arrest Date:

City:

County:

State:

Penalty:

3rd Offense

Offense:

☐ Felony

☐ Misdemeanor

Arrest Date:

City:

County:

State:

Penalty:



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Any additional offense please attach additional pages

Please Read Carefully Before Signing

I realize that the Advanced Heavy Truck Driving Training Program is offered as an opportunity in Job Corps to develop and improve my driving and employability skills so that I may become employed and progress in a career as a Class A CDL driver. I also understand that my demonstration of good work habits (punctuality, good attendance, and the ability to follow directions) and my progress as indicated on my monthly evaluation will contribute to my being recommended for a job interview.

I understand that I may not transfer to any other Job Corps program or center after enrolling in the Heavy Truck Driving Training Program. I am expected to acquire a job in the truck driving field immediately upon separation from the Heavy Truck Driving program.

With this in mind, I hereby certify that I agree to stay in the Heavy Truck Driving Training Program at the Earle C. Clements Job Corps Academy for at least one full year or until I can obtain a class A CDL with endorsements and complete the Professional Truck Driver TAR.

Print Name:

Date:

Signature:



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Student Recommendation Form

☐

Personal

☐

Professional

Name:
Job Title:
Employer:
Address:
Phone Number:
Email:

Questions	Yes or No
Is this student punctual everyday?	
Does this student take criticism well?	
Does this student act in a professional manner?	
Are this student's social skills and core values above average?	
Have you ever had to remind this student to pull up their pants or tuck in their shirt?	
Is this student employable?	

Please explain why you think this student will benefit from transferring to the Earle C Clements Heavy Truck Driving program:

Please explain why you think our program would benefit by having this student at our center:

Signature:	Date:
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