STATE OF CALIFORNIA
DMV
Department of Motor Vehicles

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OCCUPATIONAL LICENSING NUMBER

APPLICATION FOR OCCUPATIONAL LICENSE
PERSONAL HISTORY QUESTIONNAIRE

BUSINESS LICENSING UNIT

IMPORTANT — Read Carefully: Each person applying for an occupational license issued by the Department of Motor Vehicles must complete this questionnaire. Before you submit this questionnaire with your application, be sure that you have signed it and that you have fully answered each question. ***Incorrect information is grounds for refusal to issue a license.***

SECTION 1 — APPLICANT INFORMATION (*Type or print your true full name.*)

NAME (LAST, FIRST, MIDDLE)	EMAIL ADDRESS	DAYTIME TELEPHONE NUMBER ( )
RESIDENCE ADDRESS (NUMBER AND STREET) CITY STATE ZIP CODE		EVENING TELEPHONE NUMBER ( )

DATE OF BIRTH	SEX ☐ Male ☐ Female ☐ Nonbinary	HAIR COLOR	EYE COLOR	HEIGHT	WEIGHT

DRIVER LICENSE/IDENTIFICATION CARD NUMBER	STATE	EXPIRATION DATE	SOCIAL SECURITY/INDIVIDUAL TAXPAYER ID NUMBER

SECTION 2 — EMPLOYMENT HISTORY FOR THE PAST THREE YEARS (*Begin with your most recent job. List each separately.*)

FROM MO YR	TO MO YR	EMPLOYERS: NAMES, ADDRESSES, TYPE OF BUSINESS	JOB TITLE/DUTIES PERFORMED

(ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED)

SECTION 3 — EDUCATION (*for Traffic Violator Schools Only*)

	NAME AND ADDRESS OF SCHOOL	NUMBER OF YEARS	GRADUATED? YES OR NO	DATE COMPLETED
HIGH SCHOOL				
COLLEGE OR UNIVERSITY				
OTHER				

SECTION 4 — BACKGROUND INFORMATION

1. Have you ever been known by or used any name other than the name appearing on this questionnaire? ..... ☐ Yes ☐ NO

   IF YES, LIST NAME(S)

2. Have you previously been or are you now licensed or have you ever applied in this state as a vehicle salesperson, representative, distributor, dealer, registration service, dismantler, manufacturer, remanufacturer, transporter, vehicle verifier, lessor-retailer, driving school owner, operator, or instructor, traffic violator school owner, operator or instructor or all-terrain vehicle safety training organization or instructor? ..... ☐ Yes ☐ NO

   IF YES, LIST LICENSE NUMBER

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3. Have you ever had a business or occupational license issued by this department or an application for such license refused, revoked, suspended or subjected to other disciplinary action or were you ever a partner, managerial employee, officer, director, or stockholder in a firm licensed by this department, and the license was revoked, suspended or subject to other disciplinary action? ..... ☐ YES ☐ NO

IF YES, LIST LICENSE NUMBER, TYPE OF LICENSE, ACTION BY DEPARTMENT, AND DATE OF ACTION.

4. Were you ever the holder of an occupational license issued by another state, authorizing the same or similar activities of a license, and that license was revoked or suspended for cause and was never reissued, or was suspended for cause, and the terms of suspension have not been fulfilled? ..... ☐ YES ☐ NO

IF YES, DESCRIBE TYPE OF LICENSE, LIST LICENSE NUMBER, STATE LICENSE WAS ISSUED.

5. Have you ever had a civil judgment rendered against you, or as a sole owner, partner, managerial employee, public administrator, officer, director, stockholder, or LLP/LLC managing member?..... ☐ YES ☐ NO
If yes, was it a result of a state issued licensed activity? ..... ☐ YES ☐ NO

IF YES, STATE THE AMOUNT AND WHETHER PAID OR UNPAID

IF YES, DESCRIBE TYPE OF LICENSE, LIST LICENSE NUMBER, STATE LICENSE WAS ISSUED, NAME AND LOCATION OF COURT OF JURISDICTION

6. Have you as a sole owner, partner, managerial employee, officer, director, stockholder, or LLP/LLC managing member sought relief from creditors due to financial hardship in either state or federal court? ..... ☐ YES ☐ NO

IF YES, DESCRIBE TYPE OF LICENSE, LIST LICENSE NUMBER, STATE LICENSE WAS ISSUED, GIVE DATE BANKRUPTCY FILED, NAME AND LOCATION OF COURT OF JURISDICTION

7. Do you currently have any criminal charges pending against you in any jurisdiction? ..... ☐ YES ☐ NO

IF YES, STATE THE COURT, CASE NUMBER AND THE NATURE OF THE CHARGES.

8. Have you ever: (If "YES", give details below.)
(a) Been dismissed, fired, demoted, had your salary or compensation reduced or had any other adverse action taken against you, for any reason? ..... ☐ YES ☐ NO
(b) Resigned from or quit a position while you were under investigation or after being informed discipline would be taken against you, or during an appeal from a disciplinary action? ..... ☐ YES ☐ NO
(c) Been rejected or told you would not receive permanent or continued employment during any type of probationary or trial period on the job? ..... ☐ YES ☐ NO
(d) If the termination, demotion or other adverse action from employment involved any civil or administrative case, please state court or agency and case number. ..... ☐ YES ☐ NO

DETAILS: (ATTACH SEPERATE SHEET IF ADDITIONAL SPACE IS NEEDED)

9. **ALL APPLICANTS:**
EXCLUDING* TRAFFIC OFFENSES**, have you ever been CONVICTED, PLACED ON PROBATION, OR RELEASED FROM INCARCERATION FOLLOWING CONVICTION for any crime or offense, either Felony or Misdemeanor, of ***ANY jurisdiction, **within the last ten years?** Read **Important Notice** on the next page and complete Section 5. ..... ☐ YES ☐ NO

10. **APPLICANTS FOR DRIVING SCHOOL OWNER, TRAFFIC VIOLATOR SCHOOL OWNER, ALL-TERRAIN VEHICLE SAFETY TRAINING ORGANIZATION OWNER:**
INCLUDING* TRAFFIC OFFENSES**, have you ever been CONVICTED, PLACED ON PROBATION, OR RELEASED FROM INCARCERATION FOLLOWING CONVICTION for any crime or offense, either Felony or Misdemeanor, of ***ANY jurisdiction, **within the last ten years?** Read **Important Notice** on the next page and complete Section 5. ..... ☐ YES ☐ NO

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IMPORTANT NOTICE **IMPORTANT NOTICE** **IMPORTANT NOTICE**

*Even if you were pardoned, pled nolo contendere, or if the conviction was later expunged from the record of the court or set aside under *California Penal Code* (CPC) §1203.4, or any other federal or state law equivalent, you must disclose the conviction. If you are awaiting judgment and sentencing following entry of a plea or jury verdict, **you must still disclose the conviction.** ***Applicants need NOT disclose a conviction for violation of California Health and Safety Code (CHSC) §§11357(b), (c), (d) and (e); or 11360(b), if the conviction is more than two years old.***

Failure to disclose all convictions, including those out-of-state or out-of-county **may result in the cancellation** of the temporary permit and may result in the refusal of the occupational license. Listing all conviction information may not necessarily preclude you from receiving a license.

Applicant Initials Required _____

FAILURE TO INITIAL WILL DELAY PROCESSING OF THIS APPLICATION

SECTION 5 — CONVICTIONS

If you answered "Yes" to questions #9 or #10, list each separate offense, the date of conviction, offense, court of jurisdiction and disposition in the appropriate columns.

TO EXPEDITE A REVIEW OF YOUR APPLICATION, THE FOLLOWING EVIDENCE MUST BE SUBMITTED:

- Certified copy of the arresting agency report;
- Certified copy of the court documents.
- CPC §1203.4, expungement of your conviction(s);*
- Written receipts for payment of court-ordered restitution, fines and fees;
- Character letters attesting to your honesty and integrity by persons who know the circumstances of your conviction(s);
- Evidence of completion of a drug or alcohol abuse program.

DATE OF CONVICTION	CONVICTED OF	MISDEMEANOR OR FELONY	COURT OF JURISDICTION (FULL NAME AND ADDRESS)	DISPOSITION OF OFFENSE (DESCRIBE SENTENCE)			
				Amount Fined	Term of Probation	Jail or Prison Term	Date Released

(ATTACH SEPARATE SHEET IF ADDITIONAL SPACE IS NEEDED)

FAILURE TO PROVIDE COMPLETE INFORMATION ON THIS APPLICATION, INCLUDING INFORMATION RELATING TO EMPLOYMENT HISTORY AND CRIMINAL CONVICTIONS, IS GROUNDS TO DENY ISSUANCE OF A LICENSE BY THE DEPARTMENT OF MOTOR VEHICLES.

SECTION 6 — APPLICANT CERTIFICATION

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE	TITLE	DATE
X		

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IT IS IMPORTANT THAT YOU READ AND UNDERSTAND THE FOLLOWING INFORMATION

ADVISORY STATEMENT

The information required on this form pertains to eligibility for issuance of an occupational license. It is required under authority of Division 5 of the *California Vehicle Code* (CVC). Failure to provide the information is cause for refusal to issue an occupational license.

This information is public record, regularly used by law enforcement agencies, and is open to inspection by the public. Information contained in these records, classified as confidential or personal pursuant to the Information Practices Act of 1977 and the Public Records Act, is exempt from disclosure. Individuals are entitled to inspect or obtain copies of information contained in their records during regular office hours by prior arrangement.

The Occupational Licensing Branch, P.O. Box 932342, Sacramento, CA 94232-3420, is responsible for maintaining this information.

DISCLOSURE STATEMENT

SOCIAL SECURITY NUMBER COLLECTION DISCLOSURE — You are required by law to provide your social security number or your application will be denied.

Your social security number will be collected pursuant to *California Business and Professions Code* (CBPC) §30. It is used in the administration of occupational licensing laws to determine eligibility for issuance or renewal of an occupational license subject to the applicable provisions of the CVC, CBPC §§29.5, 30 and 31, as well as *California Welfare and Institutions Code* (CWIC) §11350.6. It is also used to aid in the collection of monies owed in connection with failure to pay a fine or failure to appear in court by an applicant; and to aid in the collection of monies owed by an applicant in connection with Aid to Families with Dependent Children, Child Support and Establishment of Paternity and Federal Payments for Foster Care and Adoption Assistance Programs, pursuant to 42 U.S.C. §§405 and 42 U.S.C. §651 et seq.

Your social security number is not provided for public inspection; however, it will be provided in response to requests for information from state and federal agencies operating and involved in the collection of taxes and child support payments pursuant to 42 U.S.C. §601 et seq., and CBPC §30.

Collection of your social security number is mandatory. Failure to furnish the information requested will result in denial of processing an application for issuance or renewal of an occupational license or permit, pursuant to CBPC §30, Subdivision(c).

DELINQUENT TAX DEBT

DELINQUENT TAX DEBT (Effective July 1, 2012) — California state law allows the California Department of Tax and Fee Administration and the Franchise Tax Board to share taxpayer information with the DMV and requires you to pay a delinquent state tax obligation. Failure to pay this delinquent tax obligation may result in the suspension of your All-Terrain Vehicle Safety Training Organization, Dealer, Dismantler, Distributor, Driving School Owner, Lessor-Retailer, Manufacturer, Registration Service, Remanufacturer, Traffic Violator School Owner, or Transporter license(s).

Please be advised that you may not reapply for a license until a period of one year has elapsed since a previous license for which you are applying now has been revoked, refused, or denied pursuant to CVC §§11810(d), 11903(c), and 11107(c).

APPLICANT SHOULD RETAIN THIS PAGE FOR THEIR INFORMATION IF DOWNLOADED FROM THE INTERNET.

DO NOT SUBMIT WITH APPLICATION.