SOUTH DAKOTA DRIVER LICENSE / I.D. CARD APPLICATION

	(Print in Black Ink)								
SD DRIVER LICENSE/ID NUMBERSOCIAL SECURITY NUMBER									
NAME		FIRST MIDDLE	DATE OF BIRTH// Sex						
RESIDENTIAL AL	DDRESS _	CITY	STATEZIP CODE						
MAII ING ADDRE	00	Apt#	STATEZIP CODE						
MAILING ADDRESS CITY STATE ZIP CODE (If different than above)									
HEIGHT FT IN. WEIGHT EYE COLOR COUNTY									
EMAIL ADDRESS DAYTIME PHONE NUMBER									
I AM APPLYING FOR:									
Car/Light Truck/		Car/Light Truck/Moped/Motorcycle: Moto	orcycle Only: Commercial Driver License:						
Class 1			Class 3 CDL (Complete Sections A, B & C)						
_		SECTION A: ALI Do you have a Living Will and want it to be indicate							
1. YES 🗆	NO 🗆	Do you have a Living will and want it to be indicate Do you have Durable Power of Attorney for Health	·						
2. YES 🗆	ио □								
3. YES	NO 🗆	Are you currently behind in child support payments of \$1,000 or more?							
4. YES	№ □	Do you currently have a license to drive in another state/country? If YES, in what state /country? LICENSE #							
5. YES □	№ □	Do you currently have an Identification Card issued in any other state/country? If YES, in what state/countryID #ID #							
6. YES □	NO 🗆	Do you currently, or have you ever had your right to lf YES, When?	o drive suspended, revoked, canceled, disqualified, or denied? Which State?Reason?						
7. YES 🗖	ио □	Have you lost your current driver license or identific If YES, which state was your lost card issued from?							
		I also certify that I have lost or destroyed the last is:	sued driver license or identification card issued to me and it is no longer in my ow null and void and may not be used to operate a motor vehicle or to be used						
		for identification purposes.							
8. YES 🗖	ио □	blackouts? If YES, the date of the last episode	any epileptic or narcoleptic episodes or other convulsions, seizures, or						
9. YES 🗖	№ 🗖		of a person on active duty, in the U.S. Armed Forces? (Must show ID)						
10. YES 🗖	ио □	Have you ever been known by any other name, inc If YES, what name(s)?	luding maiden name?						
11. YES 🗆	ио □	Are you a United States citizen? (If no, you must s	show documents proving lawful status.)						
12. YES NO NO Would you like veteran indicated on your license? Must prove honorable discharge by providing military DD Form 214, DD Form 2 (retired), DD Form 2A (reserve retired), National Guard Form NGB22, Uniformed Services ID (Retired) or certificate									
12. YES 🗆	№ □	Form 2 (retired), DD Form 2A (reserve retired), N	Must prove honorable discharge by providing military DD Form 214, DD National Guard Form NGB22, Uniformed Services ID (Retired) or certificate						
		Would you like veteran indicated on your license? If Form 2 (retired), DD Form 2A (reserve retired), N signed by veteran's service officer. death, I would like to be an organ/tissue do	National Guard Form NGB22, Uniformed Services ID (Retired) or certificate						
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I understand that upon issuance of a driver's license or identification card in the state of South Dakota, any driver's license or identification card previously issued by another state will be cancelled.

SIGNATURE:

DATE OF APPLICATION:

Your signature here applies to the entire application

SECTION C: COMMERCIAL DRIVER LICENSE APPLICANTS ONLY									
I am applying for:	Commercial En		ndorsements:						
☐ Commercial Learners Permit (CLP)		☐ Passenger (P		Vehicles (N)					
☐ Class A ☐ Class B ☐ Class C		☐ School Bus (S	•	bination Tank/Hazardous (X)					
☐ Class A (Combination Vehicle)		☐ Double/Triple☐ Hazardous Ma	1 /	onal CDL (W Restriction)					
☐ Class B (Heavy Straight Vehicle) ☐ Class C (Single Vehicles – under 26,001 lbs			· · ·	80 Days					
☐ Motorcycle (3)	. with applicable endorseme	nts)							
You must check ONE of the following:		<u> </u>							
□ (NI) I drive interstate and am subject to med	cal card requirements (49 C	FR PART 391) (Valid DOT M	edical Certificate required).					
☐ (EI) I drive interstate and am exempt from m	· · · · · · · · · · · · · · · · · · ·	•							
☐ (EA) I drive intrastate only and am not subje			''I ODOL OO 404 04 /						
	(NA) I drive intrastate and am subject to medical card requirements (49 CFR PART 391) in accordance with SDCL 32-12A-24 (Intrastate Only and valid DOT Medical Certificate required).								
☐ YES ☐ NO I will be operating a vehicle eq	uipped with air brakes.								
☐ YES ☐ NO Have you held a license in any									
☐ YES ☐ NO SCHOOL BUS APPLICANTS ONLY: Have you been convicted of a DUI within the past 3 years or have you ever been convicted of any									
offense involving moral turpitude? CDL Downgrade:									
<u> </u>	ndorsements Lunderstand	that if I want to regain my CI	OL or CDL endorsement/s) hoth knowledge and skills					
I am choosing to drop my CDL or CDL endorsements. I understand that if I want to regain my CDL or CDL endorsement(s) both knowledge and skills testing will be required if it has been over one year from this application date. If I reapply within one year of the date of this application only knowledge testing									
will be required, and if I apply within 30 days of		rill be required. Please note: I	Hazardous Materials endo	prsement testing is required					
for renewals, transfers, and the applicant choic									
Initials: CDL Class:	CDL Endorsement(s):								
er	CTION D. ADDI ICAN	NTS UNDER 18 YEARS	05 405						
PARENTAL/GUARDIAN CONSENT MUST B				TA DRIVER EXAMINER					
I certify that I am the Parent/Guardian and I he			210 011 000 111 27 1110	THE PROPERTY OF THE PROPERTY O					
(Check all that apply)									
Apply for a South Daketa driver	icanas instruction normit a	r non driver identification card	under the requirements	of Courth Dokata Jawa					
☐ Apply for a South Dakota driver				or South Dakota law,					
☐ Have the organ/tissue donor ind	cator placed on the driver lid	cense, permit, or non-driver id	entification card.						
Upgrade from Instruction Permit to Restric	ted Minors Permit:								
☐ I certify the minor applicant has	completed the requirements	of the instruction permit. This	driver has completed 50	hours of adult supervised					
driving since the issuance of the Lea	arner's permit. The 50 hours	of driving have included 10 h	ours in inclement weather	, and 10 hours have been					
after dark.									
Parent/Guardian Signature		Print Name							
Physical Address									
*Please include city, state, and zip code									
Subscribed and sworn to before me on this	day of , 20)							
		Cinnature of Natar	/ Public or South Dakota	Daissa Francisca					
My Commission Expires:		Signature of Notar		Driver Examiner					
EXAMINER USE ONLY									
Purpose for Application:	□ RENEW □ DU	PLICATE TRANSF	ER 🗆 DATA CH	ANGE					
Fee Collected:	Driver License Restriction	ine.	Commercial Driver License Restrictions:						
\$	A B C F G	I R Y							
			E K L M N O V W Z						
<u>Visual Acuity:</u>		n-Commercial:							
Left Eye Both Eyes Right Eye	Knowledge Test	Results	M N P X						
20/ 20/ 20/	Rules of the Road			Permit Restrictions:					
		☐ Pass ☐ Fail ☐ Waived	3 rd Party CDL:						
Wearing Corrective Lens? ☐ Yes ☐ No	Motorcycle	□ Pass □ Fail □ Waived □ Pass □ Fail □ Waived	3 rd Party CDL:	Date:					
Wearing Corrective Lens? ☐ Yes ☐ No Computer Checks:	Motorcycle DE Date:		ELDT Hazmat Date:	Date:					
Computer Checks:		□ Pass □ Fail □ Waived	ELDT Hazmat Date:	Date:					
Computer Checks: □ SAVE/VLS □ E-Agent	DE Date: Skills Test	□ Pass □ Fail □ Waived MC Date: Results	ELDT Hazmat Date: □ CDLIS □ DACH CDL 2 nd Verification Che	Date:					
Computer Checks: □ SAVE/VLS □ E-Agent DL / ID Surrendered? □ Yes □ No	DE Date: Skills Test Car / Light Truck	Pass Fail Waived MC Date: Results Pass Fail Waived	ELDT Hazmat Date: □ CDLIS □ DACH CDL 2 nd Verification Che Military Skills Waiver Da	Date:					
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Computer Checks: □ SAVE/VLS □ E-Agent DL / ID Surrendered? □ Yes □ No Federally Compliant? □ Yes □ No State □ Class □ Documents Presented: U.S. Citizen: Social Sec □ U.S. Birth Certificate □ Social Sec	DE Date: Skills Test Car / Light Truck Motorcycle DE Date: Surity: ecurity Card DD2	Pass Fail Waived MC Date: Results Pass Fail Waived Date: Pass Fail Waived MC Date:	ELDT Hazmat Date: CDL 2nd Verification Cho Military Skills Waiver Da Military Even Exchange Testing – Commercia Test General Knowledge (Combination Vehicle (Date: 10-Year History eack: ste: Waiver Date: Pass=80% / Fail=70% GK) CV) AB)					
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Computer Checks: □ SAVE/VLS □ E-Agent DL / ID Surrendered? □ Yes □ No Federally Compliant? □ Yes □ No State □ Class □ Documents Presented: □ U.S. Citizen: □ Social Sec □ U.S. Birth Certificate □ Social Sec □ W-2 □ U.S. Passport □ W-2 □ Certificate of Birth Abroad □ 1099	DE Date: Skills Test Car / Light Truck Motorcycle DE Date: Personal Security: Veteral ecurity Card DD 6 DD 6 Stub NGE	Pass Fail Waived MC Date: Results Pass Fail Waived Pass Fail Waived MC Date: n: 14 Form 2 (Retired) Form 2A (Reserve Retired)	ELDT Hazmat Date: CDL 2nd Verification Che Military Skills Waiver Da Military Even Exchange Testing - Commercia Test General Knowledge (Combination Vehicle (Doubles & Triples (Date: 10-Year History ack: ste: Waiver Date: Pass=80% / Fail=70% GK) CV) AB) DT) TK)					
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Computer Checks: SAVE/VLS E-Agent DL / ID Surrendered? Yes No Federally Compliant? Yes No State Class Documents Presented: U.S. Citizen: Social Section U.S. Birth Certificate Social Section U.S. Passport W-2 Certificate of Birth Abroad 1099 Certificate of Citizenship Payroll State of Certificate of Naturalization Non-Citizen: Marriag Permanent Resident Card Divorce Employment Auth. Doc. Court N Refugee Travel Doc. Address: Foreign Passport Address:	DE Date: Skills Test	Pass Fail Waived MC Date: Results Pass Fail Waived Date: MC Date: 14 Form 2 (Retired) Form 2A (Reserve Retired) 222 Tomed Services ID Ifficate Signed by VSO	ELDT Hazmat Date: CDL 1s	Date: 10-Year History eck: tite: Waiver Date: Pass=80% / Fail=70% GK) CCV) AB) DT) TK) HZ) PV)					
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