CDOT Flagger Training Entity Certification Application



COLORADO Department of Transportation

This application is for certification and recertification for entities participating in the **Colorado Department of Transportation (CDOT) Flagger Training Program**. The information required by CDOT and provided by the entity will determine the applicant's eligibility for certification (initial application) or recertification (every subsequent annual application) as a CDOT Certified Flagger Training Entity, hereafter referred to as entity. Entity applicants shall meet all Flagger Program requirements and terms and conditions as defined by CDOT. CDOT's approval of this application is required before an entity may administer flagger training and issue flagger certifications. Entities must complete and submit the most current versions of the following documents and required supplemental documentation: 1) CDOT Flagger Training Entity Certification Application, 2) CDOT Flagger Training Entity Terms and Conditions, 3) CDOT Flagger Instructor Agreement/s (one required for each entity Flagger Instructor). These documents must be completed, signed, and submitted electronically in PDF format, or completed physical documents may be dropped off or mailed to the CDOT Flagger Program at 2829 West Howard Place, Denver, CO 80204.

Entity Applicant Information

Entity Name:				Date of	Date of Application:		
Entity Type (mark on	e box below)						
Private/Small	Business		Non-Profit		School		
□ Government			Workforce		Law Enforcem	ent	
Temporary Employment Agency			Corrections		Other:		
Can your Entity provide flagger training and certification to non-employees? $\ \square$ Yes $\ \square$ No							
Entity EIN, FEIN, or Secretary of State ID #:							
Mailing Address:							
	Street					Suite/Unit #	
	City				State	Zip Code	
Physical Address:							
(if different from mailing address)	Street					Suite/Unit #	
	City				State	Zip Code	
Phone:		Em	nail:				
	Er	ntity	Designated Con	itact			
Name:			Ph	one:			
Title:			Em	nail:			
CDOT Flagger Program 2829 West Howard Pla Denver, CO 80204		w.codc	nt.gov/safety/traffic-safe	ety/traffic-ope		303-757-9664 lagger@state.co.us lagger-program/main	

Entity Flagger Training Locations

Training Address: Suite/Unit # Street City State Zip Code **Training Address:** Street Suite/Unit # City State Zip Code **Training Address:** Suite/Unit # Street City State Zip Code **Training Address:** Street Suite/Unit # City State Zip Code **Training Address:** Suite/Unit # Street City State Zip Code **Training Address:** Street Suite/Unit # City Zip Code State **Training Address:** Street Suite/Unit # City State Zip Code **Training Address:** Street Suite/Unit # City State Zip Code

List all the physical location(s) that your entity utilizes for flagger training.

Use additional pages if necessary.

Entity Affidavit

The entity representative (i.e., owner, manager, designated contact, etc.), having legal authority for the company/agency, in the capacity of the Flagger Trainer Entity as certified by CDOT, shall sign this *Entity Affidavit* and accept the terms and conditions herein.

This *Entity Affidavit* shall be signed using either the Adobe Acrobat Certificates "Digitally Sign" feature or by signing a hard copy, scanning, and saving as an Adobe PDF. If neither signature option is possible, this form will need to be completed, printed, signed, and mailed to our office. Entities shall retain a copy of this agreement for their records.

Entity Name:

Signatory Entity Representative:	
Signatory Representative Title:	

Flagger Training Entity certifying and/or recertifying applicants attest to the following:

- I have read, understand, and will adhere to the CDOT Flagger Training Entity Program rules and terms and conditions as defined in this application, terms and conditions, flagger instructor agreement, required submittals, and other CDOT Flagger Program requirements as listed on the CDOT website at <u>https://www.codot.gov/safety/traffic-safety/traffic-operations-</u> technology/flagger-program/main.
- The information I have provided in this application and the required supplements is complete, accurate, and subject to verification.
- I will protect personally identifiable information (PII) of our entity, instructors, and flagger students in accordance with the U.S. General Services Administration (GSA) "Rules of Behavior for Handling Personally Identifiable Information."
- I understand that if our entity violates any terms of this agreement, CDOT has the right to deny, suspend, or revoke our CDOT Flagger Training Entity Certification.

I AFFIRM THAT I HAVE READ AND AGREE WITH THE AFOREMENTIONED STATEMENTS.

Signatory Entity Representative Signature

Date

FLAGGER TRAINING ENTITY APPROVAL BY CDOT

CDOT Representative Name (Print), Signature

Date

ENTITY RECERTIFICATION DUE BY (completed by CDOT)