

Chemeketa Youth Tractor Safety Certification Application

April & May 2024

Chemeketa Community College

4000 Lancaster Dr NE | Bldg 60
Salem, OR 97305
503-399-5139 M-F 8am-5pm
ag@chemeketa.edu



Agriculture Science
& Technology
Chemeketa Community College



Class Dates & Locations

Chemeketa Salem | April 27 9am-3:30pm & April 28 10am-4:30pm

Chemeketa Salem | May 4 9am-3:30pm & May 5 10am-4:30pm

Dallas High School | May 4 & May 18 | 8am-2:30pm both days

Class Structure

These classes are HYBRID. Online Course Work will open for access 2 weeks prior to in person class. Approx. 12 hours coursework and written exam are to be completed prior to first day of class. Students work at own pace through the class.

Application & Payment

Space is limited to the first 15 students who complete applications and payment. Classes will remain open until filled.

Parent & Student Orientation Meeting

Monday, April 1, 6pm
Zoom Meeting
Link will be sent



Included in this Application:

Application Process Instructions

Application *

Assumption of Risk/Permission to Participate *

Program Overview & Agreement *

*REQUIRED

Application Process

Step-one: Complete the application forms

Submit the following (include all signatures)

- Application Form
- Assumption of Risk/Permission to Participate & FERPA Statement Form
- Program Overview & Agreement Form

Step-two: Submit completed forms

Return by email (preferred) or mail

Scan and email to:

ag@chemeketa.edu

Must be a full-page scan (PDF preferred)

Mail:

Chemeketa Community College
Attn: Agriculture Science & Technology
4000 Lancaster Drive NE | Bldg 60
Salem, OR 97305

Application is NOT considered complete until payment is also received.

Application is first come, first served until classes are full.

Step-three: Submit payment

Class Cost: \$99

Includes all materials.

Digital payment can be made at any time. The application is not considered complete until both application paperwork and payment is received.

Payment Link:

https://quikpayasp.com/chemeketa/commerce_manager/payer.do?orderType=Chemeketa_Ag_5

OR use the QR Code:

Mail:

Check made out to: Chemeketa Community College

Include with the mailed application materials.



Chemeketa Youth Tractor Safety Certification Class Application Form

The College will use student social security numbers (SSN) for keeping records, complying with federal and state requirements, doing research, reporting, extending credit and collecting debts. You may be required to provide your SSN to the college for compliance with specific federal and state regulations such as applying for financial aid, loans, grant programs and tax reporting requirements. Providing your SSN means that you consent to the use of the number in the manner described. Your SSN will not be given to the general public. You will be issued a Chemeketa student identification (ID) number (K#) to be used as your primary ID. Please note that per OAR 589-004-0400, **if you choose not to provide your SSN, you will not be denied any rights as a student.** Contact Enrollment Services for additional information at 503.399.5001.

1. Chemeketa Student ID (K#)/(SSN) (PLEASE SEE STATEMENT ABOVE ABOUT SSN)																		
2. *Last Name (Legal):					3. *First Name (Legal):					4. MI								
5. *DOB: (MM/DD/YYYY)					6. *Age					7. Gender:								
8. *Mailing Address:																		
City:					State:					Zip:								
9. *Student Contact Information:					10. *Parent/Guardian Information													
Phone: _____					Name: _____													
Email: _____					Phone: _____													
Email: _____					Email: _____													
11. Are you a Citizen of the United States: <input type="checkbox"/> Yes <input type="checkbox"/> No					12. What is your Ethnicity? <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino													
13. Select one or more races to indicate what you consider yourself to be:																		
<input type="checkbox"/> American Indian/Alaska Native		<input type="checkbox"/> Asian		<input type="checkbox"/> Black/African American		<input type="checkbox"/> Native Hawaiian/Other Pacific Islander		<input type="checkbox"/> White										
I certify that all statements on this application are complete and true.																		
*Applicant Signature X _____										*Date: _____ (REQUIRED FOR ALL APPLICANTS)								
*Parent/Legal Guardian Signature (required for applicants)																		
*Printed Name: _____					*Signature: _____					*Date: _____								

<p>*SELECT CLASS OPTION:</p> <ul style="list-style-type: none"> <input type="radio"/> Chemeketa Salem April 27 9am-3:30pm & April 28 10am-4:30pm <input type="radio"/> Chemeketa Salem May 4 9am-3:30pm & May 5 10am-4:30pm <input type="radio"/> Dallas High School May 4 & May 18 8am-2:30pm both days 	<p>FOR OFFICE USE ONLY:</p> <p>PAYMENT DATE/ REG DATE</p> <p><input type="checkbox"/> CK # _____</p> <p><input type="checkbox"/> CR <input type="checkbox"/> CASH</p>
--	---

*** DENOTES REQUIRED FIELD**

Assumption of Risk/Permission to Participate

*Student Name (print): _____

Learning to drive a tractor entails known and unanticipated risks which could result in physical or emotional injury, paralysis or death, as well as damage to property, or to third parties. I understand that such risks simply can't be eliminated without jeopardizing the essential qualities of the activity. I/We are aware of the risks and believe the educational opportunity is greater than the risks.

I certify that my child has no medical or physical conditions which could interfere with his/her safety in this activity; including but not limited to, vision condition not corrected by glasses, physical or mental condition or impairment that affect your ability to drive safely, use of medication that may impair ability to operate machinery, or use of alcohol, inhalants, or controlled substance.

Please describe any condition that may affect your ability to operate machinery safely:

I authorize qualified emergency medical professionals to examine and in the event of injury or serious illness, administer emergency care to the above named student. I understand every effort will be made to contact me to explain the nature of the problem prior to any involved treatment.

In the event it becomes necessary for the College staff-in-charge to obtain emergency care for my student, neither they nor the College assumes financial liability for expenses incurred because of the accident, injury, illness and/or unforeseen circumstances.

I have read and understand that the Chemeketa Community College will make every reasonable effort to provide safe learning conditions. I am fully aware of the special dangers and risks inherent in participating in these activities, including physical injury, or other consequences arising from these activities. All my questions, if any, have been thoroughly answered. Being fully informed of these risks, I hereby consent to my child participating in the Chemeketa Community College Safe Tractor Operation Program. I have the legal authority to sign as the parent/guardian.

*Signature of student:

*Signature of parent/guardian

*Date (mm/dd/yy)

Work phone:

Home phone:

Cell phone:

In the event of an emergency, I wish the following person to be notified in case I can't be contacted:

*Individual Name: _____ *Phone # _____

Student Family Educational Rights and Privacy Act (FERPA) Statement

Participation in this educational training and national certificate program is voluntary. All demographic information, data, and test scores will remain strictly confidential. Information used to support continual development and refinement of the National Safe Tractor and Machinery Operation Program will be viewed as group data only. Individual response data is available only to the NSTMOP instructors and college program coordinator and will be used to issue certificates of completion to successful participants. Any use of data will be without identification of participants and will only be reported as group data.

The College is an equal opportunity/affirmative action employer and educational institution committed to an environment free of discrimination and harassment. For questions regarding sexual harassment, gender-based discrimination, and sexual misconduct policies, or for filing a complaint, contact the Title IX coordinator at 503.584.7323. For questions about equal employment opportunity and/or affirmative action, contact 503.399.2537. To request this publication in an alternative format, please call 503.399.5192.

*** REQUIRED: Page | 4**

Chemeketa Youth Tractor Safety Program Overview and Agreement

Refund Policy:

I understand that if the College cancels the entire class, I will get a full refund. **Students who fail to attend class, pass exams or earn certificate are not eligible for refunds.** Please contact the office at 503.399.5139 with any questions regarding refunds.

Program Completion:

I understand that the below requirements must be met in order to receive a certificate of completion:

- Student must be 14 years old or older by the first day of class.
- A minimum of 24 hours of instructional material is required. Includes online, classroom and demonstrations.
- Attend all in person sessions for the entire time.
- Complete all homework and online coursework with an average grade of 80%.
- Complete the written exam with an 80% or higher grade.
- Pass the pre-trip inspection, implement test and tractor/trailer maneuvering test with 70% or higher for each test.
- Wear appropriate dress: long pants and solid, closed-toe shoes are mandatory. Excessively baggy clothing, long jewelry, shorts or open toed sandals/shoes will result in students not being able to participate.
- Each driving exam is to be completed within 15 minutes. Students may retake exams at the discretion of the instructor.
- Certificates will be issued by email within 5 business days of the conclusion of the last day of the course. Printed copies are available for pick up from the Salem Campus Bldg 60 upon request.

Program Purpose:

I understand that the purpose of this program is to instruct youth in safe tractor and machinery operation to meet the training requirements of USDOL's Hazardous Occupations Order for Agriculture.

Additional driving and skills practice may be required to reinforce the skills being learned.

I understand that employers may have additional training requirements upon hire. This safety class is not intended to cover site specific safety and operational procedures.

I understand that any student that is under 14 during the course is not eligible to participate in the practice driving or testing portion of the class and cannot receive their certification.

By signing below, you acknowledge that you agree to all the above statements and agree to follow the rules set forth by Chemeketa Community College.

***Parent Signature:** _____ ***Date:** _____

***Student Signature:** _____ ***Date:** _____