DEPARTMENT OF TRANSPORTATION

Office of Freight and Commercial Vehicle
Operations 395 John Ireland Blvd.,
Mail Stop 420
St. Paul, MN 55155

SPECIAL TRANSPORTATION SERVICE NON-DRIVER INFORMATION FORM

NAME OF BUSINESS: _____ **MnDOT #:**_____

In addition to their drivers, providers of special transportation service are required to initiate a NETStudy 2.0 background study on the following individuals:

(1) each person with a direct or indirect ownership interest of five percent or higher in the transportation service provider;
(2) each controlling individual as defined under section 245A.02;
(3) managerial officials as defined in section 245A.02;
(4) each individual employed by the transportation service provider to assist a passenger during transport; and
(5) all employees of the transportation service agency who provide administrative support, including those who:
- **(i) may have face-to-face contact with or access to passengers, their personal property, or their private data;**
- **(ii) perform any scheduling or dispatching tasks; or**
- **(iii) perform any billing activities.**

LIST ALL PERSONS MEETING ONE OR MORE OF THE REQUIREMENTS LISTED ABOVE

Answer with Yes or No

PERSON'S NAME **Last Name, First Name**	**POSITION WITH PROVIDER**	**ENROLLED IN NETSTUDY***

*By answering yes, you are certifying that the individual meets the standards in MN Statute 174.30. Details of these rules can be found on-line at https://www.revisor.mn.gov/rules. See the brochure, "How to Access STS Regulations".

I verify the information submitted is true: _____ _____

Signature of corporate director or officer, general or limited partner, LLC board member or sole proprietor *Date*

An applicant or provider shall notify MnDOT in writing of any change in its application information within ten days of the change.