AAMVA Code Dictionary (ACD) Subcommittee Application Form

AAMVA is seeking to fill two vacancies on the ACD subcommittee. The selection of members will depend on several factors, including experience with ACD codes from various specialties such as DMV, legal, law enforcement, court, and information technology. Expertise in the application and enforcement of ACD codes is required. Experience with AAMVA systems such as the Commercial Driver License Information System (CDLIS), Problem Driver Pointer System (PDPS), and State-to-State (S2S) will also be considered. Members serve a three-year term.

**PURPOSE**

The subcommittee is a group of jurisdictions established to examine and update the AAMVA Code Dictionary (ACD) set of codes used nationwide by driving-licensing authorities and other relevant stakeholders to communicate driver’s convictions and withdrawals between jurisdictions. The subcommittee will address known limitations, prioritize enhancement needs, and identify opportunities for improving the set of codes along with the operational procedures and best practices associated with such codes. The subcommittee will also address the application, acceptance, recording, and reciprocal recognition of ACD codes to establish and maintain uniformity across all AAMVA systems and other designated formats and methods.

**APPLICANT INFORMATION**

|  |  |
| --- | --- |
| Name | Click here to enter text. |
| Title or Rank | Click here to enter text. |
| Agency or Organization | Click here to enter text. |
| Name of Organizational Unit Within Agency | Click here to enter text. |
| Street Address | Click here to enter text. |
| City, Jurisdiction, Postal Code | Click here to enter text. |
| Work Phone Click here to enter text. | Email Address Click here to enter text. |

**APPLICANT QUALIFICATIONS/BACKGROUND (check all that apply):**

**I have experience with ACD codes from various specialties, including:**

[ ]  Motor Vehicle Agency/DMV

[ ]  Legal

[ ]  CDL/Non-CDL violations and sanctions.

[ ]  Law Enforcement

[ ]  IT subject matter expert

[ ]  Training

**I have experience with the following AAMVA Driver Systems:**

[ ]  Commercial Driver License Information System (CDLIS)

[ ]  Problem Driver Pointer System (PDPS)

[ ]  State-to-State (S2S)

**I have expertise specific to:**

[ ]  Contents and application of the AAMVA ACD Manual.

[ ]  Entering and maintaining CDL/Non-CDL driver history.

[ ]  CDL/Non-CDL violations and sanctions.

[ ]  Interpreting and providing comments during the federal rulemaking process.

**APPLICANT RESUME**

**Please provide a brief resume below or attach a separate file (limit to 500 words)**

Click here to enter text.

**APPLICANT EXPECTATIONS**

Applicants chosen to be a member of the Subcommittee must be willing to travel. It is anticipated that there will be both virtual meetings and in-person meetings during FY 2025 and beyond. Subcommittee members will also be given writing and/or research assignments to complete. Members who volunteer for this Subcommittee are expected to complete the work within the agreed-upon time. In addition, conference calls will be scheduled on an as-needed basis. Members are required to make a good-faith effort to attend and actively participate in all Subcommittee meeting(s) and conference calls and complete their assigned work. Active participation includes but is not limited to regularly attending scheduled meetings, performing frequent outreach to representative states, providing feedback and casting votes when requested, and openly engaging in group discussions (offering knowledge, opinions, experience, and challenges).

**AGREEMENT AND SIGNATURE**

As an applicant, I affirm that I meet the qualifications and am willing to serve if selected.

|  |  |
| --- | --- |
| Applicant Name (printed) | Click here to enter text. |
| Applicant Signature |  | Date: Click here to enter text. |

As supervisor, I authorize this applicant to serve if selected, and I understand and support the applicant traveling to Subcommittee meetings and select AAMVA conferences. And, as much as possible, to other conferences and meetings as needed to represent the Subcommittee.

|  |  |
| --- | --- |
| Supervisor Name (printed) | Click here to enter text. |
| Supervisor Signature | Click here to enter text. | Date: Click here to enter text. |

As chief administrator, I authorize this applicant to serve if selected, and I understand and support the applicant traveling to Subcommittee meetings and select AAMVA conferences. And, as much as possible, to other conferences and meetings as needed to represent the Subcommittee.

|  |  |
| --- | --- |
| Administrator Name (printed) | Click here to enter text. |
| Administrator Signature |  | Date: Click here to enter text. |

**OUR POLICY**

It is the policy that all applicants must obtain the permission of their supervisor and chief administrator prior to submitting the application. **INCOMPLETE APPLICATIONS or APPLICATIONS NOT INCLUDING A SIGNATURE OR ACCOMPANYING AUTHORIZATION WILL NOT BE ACCEPTED.** *Electronic signatures are acceptable.*

**Please return the application to Member Services at** **committees@aamva.org****. If you have any questions about the subcommittee, please contact Jessica Ross (Jross@aamva.org)**