Virginia Driver Training

## TWO-YEAR INSTRUCTOR LICENSE APPLICATION

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**Class B - Passenger Vehicle** 

**Purpose:** Use this form to apply for a driver training school instructor license to train applicants to operate non-commercial motor vehicles.

Instructions: Return this completed application with all additional required documents to the DMV Driver Training Work Center at PO Box 27412, Richmond, VA 23269-0001. All submitted application packages that include a prior version of the application, incomplete applications, or have missing required documents will be returned.

APPLICATION INFORMATION						
APPLICATION TYPE:	RENEWAL	TWO-YEAR LICE		\$100.00 school license		
NAME OF DRIVER TRAINING SCHOOL						
INSTRUCTOR INFORMATION						
FULL LEGAL NAME OF INSTRUCTOR (pirnt) (last, first, mi, suffix)			D	MV CUSTOMER NUMBER		
ADDRESS CITY		STATE Z	ZIP CODE T	ELEPHONE NUMBER		
EMAIL ADDRESS (for online DMV access)			INSTRUCTION LICENSE NUMBER (if renewing)			
INSTRUCTOR QUALIFICATIONS AND REQUIREMENTS						
<ol> <li>All instructors providing classroom and/or in-vehicle instruction must possess five years of driving experience. (if less than five years with Virginia DMV, attach evidence of minimum driving experience requirements through licensure from another state.)</li> <li>Driving records of all instructors providing classroom and/or in-vehicle instruction must reflect no more than six demerit points.</li> <li>All instructors must have successfully completed training consisting of:         <ul> <li>a. Six semester hours in driver education approved by the Department of Motor Vehicles (certified transcript must be submitted with original application) OR</li> <li>b. A valid Virginia teaching certificate with a driver education endorsement (must be submitted with each application)</li> </ul> </li> <li>Do you meet the above requirements? YES NO</li> </ol>						
CERTIFICATION						
I certify that the above-named individual is an employee or has applied to become an employee of this driver training school in a position that involves the training of individuals in the operation of motor vehicles. I understand that a national criminal records check completed within 60 days of the submission date of this application must be provided to DMV. I understand that the Department of Motor Vehicles will verify that the instructor's Virginia driver record fulfills the requirements for licensing under current statute and regulations. I further certify and affirm that all information I have presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury, and I understand that knowingly making a false statement or representation on this form is a criminal violation.						
OWNER / MANAGER NAME (print)	OWNER / MANAGER SIGNA	TURE		DATE (mm/dd/yyy)		

OWNER / MANAGER NAME (print)	OWNER / MANAGER SIGNATURE	
INSTRUCTOR NAME (print)	INSTRUCTOR SIGNATURE	DATE (mm/dd/yyy)

DMV USE ONLY					
DMV STAMP	VERIFICATION OF:				
	COMPLETE APPLICATION INCLUDING SIGNATURES	OUT OF STATE ONLY (additional requirements)			
	\$100.00 FEE PAID	OUT-OF-STATE DRIVING RECORD			
	NATIONAL CRIMINAL BACKGROUND CHECK	DRIVER HISTORY CHECK			
	TEACHING CERTIFICATE (if applicable)	<b>ORIGINAL ONLY</b> (additional requirements)			
		COURSE TRANSCRIPT OR TEACHING CERTIFICATE			