

CHECK WHAT YOU NEED
All Fees Are Nonrefundable

- Original Instructor's Certificate (\$10.00)
- One-Year Renewal (\$10.00)
- Two-Year Renewal (\$20.00)
- Additional Certificate (\$0)
- Classroom Endorsement (\$0)
- Change of Vehicle Class Endorsement (\$0)

New York State Department of Motor Vehicles

**APPLICATION FOR DRIVING SCHOOL
INSTRUCTOR CERTIFICATE**

(Please type or print clearly. Applications completed illegibly or left incomplete will delay processing.)

www.nysdmv.com

FOR OFFICE USE ONLY

Instructor Class _____ Classroom Endorsement

Certificate No. _____

Date Issued: ____ / ____ / ____ Expiration Date: ____ / ____ / ____

Denial No. _____ Date Denied: ____ / ____ / ____

Last Name		First	M.I.	Social Security Number		Date of Birth (Mo./Day/Yr.)		Sex <input type="checkbox"/> M <input type="checkbox"/> F
Mailing Address (Street & No.)				Place of Birth		Driver License ID No.		
City		State		Zip Code		License Class	Expiration Date	Years of Driving Experience
Driver Education Instructor's Certificate (MV-283) number (attach copy)				Have you had one year of experience as an in-car instructor? <input type="checkbox"/> No <input type="checkbox"/> Yes				No. of hours: _____
If "Yes", Name of Driving School.								

Name and Address of Driving School sending application: _____

What type(s) of vehicles will you use for instruction? Auto Bus Motorcycle Tractor-Trailer Truck

Note: Section 5 of the NYS Tax Law requires the Department of Motor Vehicles to provide Social Security numbers to the NYS Department of Taxation and Finance upon request.

You must answer ALL the following questions. Questions answered "Yes" must be explained on page 2. CHECK ONE : YES NO

- | | | |
|---|--------------------------|--------------------------|
| 1. Have you ever been convicted of any traffic violations (not parking violations)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has your license to drive (or your driving privilege) ever been refused, cancelled, suspended or revoked in New York or any other state? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you ever been convicted of any crime or felony involving violence, dishonesty, deceit, indecency, degeneracy or moral turpitude? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever been convicted of perjury or of making any false statements relating to any part of the New York Vehicle and Traffic Law? ... | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Are you presently involved with any charges or court proceedings relating to the matters stated in questions 1, 3 or 4? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you ever had a driving school and/or instructor's certificate denied, cancelled, suspended or revoked? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you been an instructor for a Point Insurance Reduction Program within the last 12 months? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Have you given driver training instructions for compensation within the last 12 months? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Do you have any physical impairment that could hinder your ability to perform the duties of a driving instructor? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Have you ever been known by any name other than the one shown on this application? | <input type="checkbox"/> | <input type="checkbox"/> |

EDUCATION

Have you:	Yes	No	School
◆ received a high school diploma or GED (General Educational Development)? <i>(If "Yes," attach copy if you are an original applicant.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	_____
◆ completed a DMV approved course in traffic safety for driving school instructors (30-hour basic)? <i>(If "Yes," attach copy of certificate.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	_____
◆ completed a DMV approved advanced course in teaching techniques & methodology? <i>(If "Yes," attach copy of proof of completion.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	_____

EMPLOYMENT - List employment experience for last 5 years, most recent first. Do not include current employment in a commercial driver training school.

Original applicants must complete this section:

Name of Firm		Address of Firm	
Kind of Work	Dates Employed From _____ To _____	Reason for Leaving	
Name of Firm		Address of Firm	
Kind of Work	Dates Employed From _____ To _____	Reason for Leaving	
Name of Firm		Address of Firm	
Kind of Work	Dates Employed From _____ To _____	Reason for Leaving	

FOR OFFICE USE ONLY

Approved Disapproved By: _____ Date _____

New York State Department of Motor Vehicles
CASHIER'S RECEIPT FOR THE BUREAU OF DRIVER TRAINING PROGRAMS

Received from _____
Address _____
Amount _____

Instructor Certificate No. _____

Social Security Number _____

EXPLANATIONS

Identify by name and address all driving schools at which you have worked in the past 5 years; list most recent first.

If you answered "Yes" to any questions on the front of this form, give the details below. Identify the number of the question being answered.

The applicant agrees that:

1. if I end my employment with the driving school, I will immediately surrender my instructor's certificate to the school. *(The school is required to forward the certificate to the DMV).*
2. if I become employed by another driving school, I will apply for a new instructor's certificate for that school.
3. if my driver license is suspended or revoked, my instructor certificate is not valid, and I must surrender the certificate to DMV.
4. if DMV determines that I am not entitled to the certificate, I will immediately surrender my certificate to the driving school. *(The school is required to forward the certificate to the DMV).*
5. if I lose my certificate, I will report the loss immediately, in writing, to the DMV.
6. I will carry the instructor's certificate at all times while giving driving instructions or when I am accompanying a student to a DMV road test.
7. the instructor's certificate will be valid only to give driving and/or classroom instruction in the course of my employment or association with the driving school identified on this application.

I affirm that I have read this entire application; that I know its contents and that all answers, statements and all other matters contained in it are true. I understand that any false statement will result in the revocation of any driving school instructor's certificate that has been issued to me. **NOTE:** It is a criminal offense to knowingly make a false statement or conceal a material fact in this application. To do so will result in the revocation of your instructor certificate. **False statements are punishable under Section 210.45 of the Penal Code.**

Applicant's Signature _____ Date _____

This application must be signed by an authorized official of the driving school.

Signature of Driving School Official _____ Title _____ Date _____

WHAT IS NEEDED: Find the section below that applies to the action you want to take. It lists the documents you must provide to complete your application.

✓ AN ORIGINAL INSTRUCTOR CERTIFICATE

- ◆ A \$10 check or money order payable to the Commissioner of Motor Vehicles
- ◆ Two photographs no more than 30 days old
- ◆ A copy of the applicant's high school diploma or General Educational Development (GED)
- ◆ A copy of the applicant's written and road sign test
- ◆ A copy of the applicant's road test results for the type of vehicle used in instruction
- ◆ A copy of the Visual Acuity Report (form MV-619) completed by applicant's health care professional

✓ A RENEWAL INSTRUCTOR CERTIFICATE

- ◆ For a one-year renewal, send a \$10 check or money order payable to the Commissioner of Motor Vehicles
- ◆ For a two-year renewal, send a \$20 check or money order payable to the Commissioner of Motor Vehicles
- ◆ Two photographs no more than 30 days old
- ◆ Proof of completion of the 30-Hour Basic Course for the preparation of professional driving school instruction **(THE 30-HOUR BASIC COURSE MUST BE COMPLETED WITHIN A YEAR FROM THE DATE THE ORIGINAL INSTRUCTOR CERTIFICATE IS ISSUED)**

✓ CLASSROOM ENDORSED INSTRUCTOR CERTIFICATE

- ◆ Send a copy of the required 30-Hour Basic Course completion certificate
- ◆ Send proof of completing an approved advanced program in Teaching Techniques and Methodology **(ONE YEAR OF BEHIND-THE-WHEEL INSTRUCTION WILL ALSO BE NECESSARY FOR CLASSROOM ENDORSEMENT)**

*ATTACH
PHOTO(S)*

Photograph(s) must have been taken within past 30 days and should be 1 7/8" wide x 2" long, and must be a true likeness showing only the shoulders, neck and uncovered head.

Mail completed applications to: NYS Department of Motor Vehicles, Bureau of Driver Training Programs, 6 ESP, Room 412, Albany NY 12228.