



Instructor's Licence Application

Motor Vehicle Drivers Instructors Act 1963

IMPORTANT: - An applicant must have held an appropriate type of driver's licence for a continuous period of at least three (3) years and must be at least 21 years of age, on the date of application.

Type of licence required

Licence class	Class of motor vehicle upon which driving tuition may be given	Licence class	Class of motor vehicle upon which driving tuition may be given
R	MOTORCYCLE	C	CAR
LR	LIGHT RIGID - max 8 tonne GVM (no axle limit)	MR	MEDIUM RIGID - more than 8 tonnes GVM (2 axle only)
HR	HEAVY RIGID - more than 8 tonnes gvm (no axle limit)	HC	HEAVY COMBINATION - HR with trailer greater than 9 tonnes GVM, or prime mover and semi-trailer combination.
MC	HEAVY COMBINATION - with an additional trailer greater than 9 tonnes GVM		

Application - Declaration (Please use BLOCK letters)

I MR MRS MISS MS

SURNAME OTHER NAMES

OF RESIDENTIAL ADDRESS- NUMBER AND STREET

TOWN OR SUBURB <input type="text"/>	POSTCODE <input type="text"/>	CONTACT PHONE NUMBER <input type="text"/>	MOBILE NUMBER <input type="text"/>
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EMAIL

Hereby apply for a motor vehicle drivers instructors licence to provide tuition for _____ class vehicles (see above)

I declare that the questions overleaf have been read by me and the answers to such questions were written by me and, to the best of my knowledge and belief, are correct.

SIGNATURE <input type="text"/>	DATE <input type="text"/>
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Caution: Any person who by false statement or misrepresentation obtains or attempts to obtain a licence, renders themselves liable to a penalty of \$500 and any licence so obtained may be cancelled.

Office use only: Certification of officer receiving application

I certify that:-

- (a) The Declaration above has been read and signed by the applicant in my presence.
- (b) I have advised him/her that all questions must be answered fully and correctly.
- (c) I have inspected the licence mentioned in the answer to question 1 overleaf and have verified that the answers given in items (a), (b) AND (c) correspond with particulars on that licence.
- (d) Proof of applicant holding appropriate drivers licence for at least 3 years has been sighted

NAME OF RECEIVING OFFICER <input type="text"/>	SIGNATURE <input type="text"/>	DATE <input type="text"/>
NAME OF ISSUING CENTRE/ AGENCY <input type="text"/>		

Questionnaire

1. Have you been, or are you now, the holder of a licence issued in Western Australia or elsewhere, to drive a motor vehicle?
If so please state:
- (a) the state or country where the licence was issued _____
- (b) the number of the licence and if the licence was issued in Western Australia, the class of the licence
(i) _____ (ii) _____
- (c) the date of expiry of the licence _____
- NOTE: The driver's licence must be produced on application.**
2. Are your other names, surname and residential address correctly stated overleaf? _____
3. (a) Date of birth _____ (b) Place of birth _____
4. (a) How long have you lived at your current address? _____
(b) If less than six (6) months give previous address _____

5. (a) What is the name and address of your employer(s) during the last six months?

- (b) In what capacity were you employed? _____
- (c) When and how long did you work for him/her/them? _____
6. What are the names, addresses and phone numbers of two (2) persons who have known you personally for at least twelve months to whom reference can be made as to your character?
- NOTE: The names of relatives and immediate past employers should not be given**
- The names given should be those of persons resident in Western Australia, such as clergy, postal managers, school teachers, bank managers, business or professional people, police officers, senior officers of the public services or householders who have been residing at their present address for more than twelve months.
- Name _____ Name _____
- Address _____ Address _____
- Phone _____ Phone _____
- 7 (a) Have you successfully completed a training course or qualifying examinations as a motor vehicle drivers instructor?

- (b) If yes, full particulars must be shown _____

	Yes	No	Tick appropriate column. Give particulars if answer is Yes.
8. Do you wear any visual aids? (E.G. Contact lenses or spectacles)			
9. Do you or have you ever suffered from:			
(a) fits or epilepsy?			
(b) frequent fainting or giddiness?			
(c) Diabetes? If Yes, are you being treated with insulin or any other medication to reduce blood sugar?			
(d) any permanent disability to either hand, arm, foot, leg or eye, or from deafness?			
(e) any physical disability likely to affect your ability to control a motor vehicle?			
10. Have you ever, in Western Australia or elsewhere:			
(a) been refused or disqualified from obtaining a licence as a driver or rider of a motor vehicle, or as a motor vehicle drivers instructor?			
(b) had a licence cancelled or suspended?			
11. Have you ever in Western Australia or elsewhere, been convicted of:			
(a) driving a motor vehicle whilst under the influence of drugs or alcohol?			
(b) any other offence.			