

**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)

**APPLICATION FOR DRIVING SCHOOL  
INSTRUCTOR CERTIFICATE**

(Please fill out application completely and print clearly -  
this will reduce processing delays.)

[www.dmv.ny.gov](http://www.dmv.ny.gov)

**FOR OFFICE USE ONLY**

Instructor Class _____	<input type="checkbox"/> Classroom Endorsement
Certificate No. _____	
Date Issued:    /    /	Expiration Date:    /    /
Denial No. _____	Date Denied:    /    /

**NAME AND ADDRESS OF LICENSED DRIVING SCHOOL SUBMITTING THIS APPLICATION:**

**NAME OF PERSON APPLYING FOR A DRIVING SCHOOL INSTRUCTOR CERTIFICATE:**

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
What type(s) of vehicles will you use for instruction? <input type="checkbox"/> Auto <input type="checkbox"/> Bus <input type="checkbox"/> Motorcycle <input type="checkbox"/> Tractor-Trailer <input type="checkbox"/> Truck					
<b>Note:</b> 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 below or on additional page(s).** **CHECK ONE**

- |   |                          | YES                      | NO                       |
|---|--------------------------|--------------------------|--------------------------|
| 1. Have you had one year or more of experience as an in-car driving school instructor? .....<br><i>If yes, list name of driving school and the number of hours of instruction you have provided</i><br>_____ Number of hours: _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you been compensated for giving driving instruction within the last 12 months? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you have a Driver Education Instructor Certificate (form MV-283)? If yes, attach a copy of the certificate, and write Certificate (MV-283) number here: .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Within the last three years, have you been convicted of any moving violations (other than parking violations)? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. <u>Have you ever:</u>  |                          |                          |                          |
| a. had your license to drive (or your driving privilege) refused, cancelled, suspended or revoked in New York or any other state? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. had a driving school and/or instructor's certificate denied, suspended or revoked? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. been a Point & Insurance Reduction Program instructor? If yes, list the name of the delivery agency, and when you taught, below. ....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. been known by any name other than the one shown on this application? If yes, what name? .....  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. been convicted of a felony, or any crime involving violence, dishonesty, deceit, indecency, degeneracy or moral turpitude? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. been convicted of perjury, or of making any false statements relating to any part of the New York State Vehicle and Traffic Law? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Are you presently involved with any charges or court proceedings relating to a DMV matter (including driving school, Private Service Bureau, PIRP, and/or Vehicle Safety)? .....   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**NOTE: The suspension or revocation or a pending matter in violation of Vehicle and Traffic Law may be due cause for denial of this application.**

**EXPLANATIONS:** If you answered "Yes" to any questions above, give the details below or attach additional page(s). Identify the number of the question being answered.

**EDUCATION - Attach a copy of all credentials, disregard if previously submitted**

Have you:	Yes	No	Date Issued	School
◆ received a high school diploma or GED (General Educational Development)? <i>(If "Yes," attach copy if you are an original applicant.) Foreign documents must be translated by a Civil Service approved organization</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"/>	/ /	_____

<b>FOR OFFICE USE ONLY</b>	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	By: _____	Date: _____
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Applicant Name: \_\_\_\_\_

**EMPLOYMENT HISTORY**

List employment experience for last 5 years, most recent first.

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

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

✓ All applicable fees should be made payable to the "Commissioner of Motor Vehicles." Please note that "starter checks" cannot be accepted.

✓ **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 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/WAS ISSUED)**

*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.*

✓ **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)**

**The applicant agrees that:**

1. If I end my employment with the driving school, I will surrender my instructor's certificate to the school. *(the school is required to surrender the certificate to the DMV).*
2. The instructor's certificate will only be used to give driving and/or classroom instruction in the course of my employment or association with the driving school identified on this application.
3. If I wish to be employed by an additional driving school, I understand that the school must submit an application for an additional instructor's certificate.
4. If my driver license is suspended or revoked, either temporarily or indefinitely, I understand that my instructor certificate will immediately become void, and I must surrender my certificate to the driving school or DMV.
5. If I lose my certificate, I will report the loss to the local police in order to obtain a police report and have my employer submit a request for a duplicate to 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.

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.**

Name of Driving School Official (printed) \_\_\_\_\_ Title \_\_\_\_\_

Signature of Driving School Official \_\_\_\_\_ Date \_\_\_\_\_

**Mail completed applications to: NYS Department of Motor Vehicles, Bureau of Driver Training Programs, 6 ESP, Room 221, Albany NY 12228.**