



**Maine Bureau of Motor Vehicles
Driver Education Program**

Driver Education Instructor License Application

Please check all that apply

<input type="checkbox"/> Initial Application- Fee \$100.00 + \$21 criminal record fee	<input type="checkbox"/> Class A (classroom & behind the wheel)
<input type="checkbox"/> Renewal Application- Fee \$100.00 + \$21 criminal record fee	<input type="checkbox"/> Class B (behind the wheel only)
<input type="checkbox"/> Upgrade from Class B to Class A Instructor License (No fee)	<input type="checkbox"/> Class A Vehicles \$35 exam fee in addition to \$121 fee (init app)
<input type="checkbox"/> Addition of Vehicle Type \$35 for Class A, B and School Bus	<input type="checkbox"/> Class B Vehicles \$35 exam fee in addition to \$121 fee (init app)
	<input type="checkbox"/> Class C Vehicles \$10 exam fee in addition to \$121 fee (init app)
	<input type="checkbox"/> School Bus \$35 exam fee in addition to \$121 fee (init app)

INSTRUCTOR INFORMATION

FULL LEGAL NAME (LAST)				(FIRST)	(MI)	(SUFFIX)	DATE OF BIRTH
HOME ADDRESS		STREET	CITY	STATE	ZIP CODE	COUNTY	
MAILING ADDRESS (if different from above)			CITY	STATE	ZIP CODE		
HOME TELEPHONE #	CELL #		EMAIL ADDRESS				

Do you authorize the Bureau of Motor Vehicles to disclose your name, mailing address, and email address with driver education professional organizations and driver education related product vendors? YES NO

DRIVING SCHOOL INFORMATION

NAME OF DRIVING SCHOOL WHERE EMPLOYED	SCHOOL TELEPHONE #
NAME OF DRIVING SCHOOL WHERE EMPLOYED	SCHOOL TELEPHONE #

INSTRUCTOR QUALIFICATIONS AND REQUIREMENTS

Note: If not previously licensed, proof of high school graduation or GED, certificate for appropriate introductory driver education course, valid first aid card and a certificate as proof of completion of driving dynamics must accompany this application. If you are applying for a truck endorsement, a letter from a current or past employer showing 2 years of operation in the past 10 years in the representative vehicle you plan to instruct in must also accompany this application.

- Do you hold a valid driver's license? Yes No
If you hold an out of state driver's license, please submit a current 6 year driving record from that state.
- Have you held a driver's license for at least six (6) years? Yes No
- Has your privilege to provide driver education, register or operate a motor vehicle ever been suspended or revoked in this state or any other state or province? Yes No If yes, please list date and type of suspension _____
- Have you ever been convicted of a crime, other than a traffic offense, in Maine or any other state or province? Yes No
(If you hold an out of state driver's license, please submit a criminal record from that state.)
If yes, please list date, type and location of violation _____
- Is there any proceeding now pending relative to any suspension, revocation or violation listed in question 3 or 4 above? Yes No
If yes, please explain _____

INSTRUCTOR MEDICAL INFORMATION

Do you have any of the following medical conditions?

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Blackouts/Loss of Consciousness | <input type="checkbox"/> Musculoskeletal/Neurological | <input type="checkbox"/> Substance Use Disorder | <input type="checkbox"/> Dementia |
| <input type="checkbox"/> Heart trouble | <input type="checkbox"/> Hypoglycemia | <input type="checkbox"/> Limb Amputation | <input type="checkbox"/> Mental Disorder |
| <input type="checkbox"/> Multiple Sclerosis | <input type="checkbox"/> Narcolepsy | <input type="checkbox"/> Parkinson's | <input type="checkbox"/> Seizures/Epilepsy |
| <input type="checkbox"/> Sleep Apnea | <input type="checkbox"/> Spinal Cord Injury | <input type="checkbox"/> Stroke/Brain Injury | <input type="checkbox"/> Chronic Lung Disease |

Other conditions affecting your ability to safely operate a motor vehicle _____

INSTRUCTOR CERTIFICATION

I am an applicant for a Driver Education Instructor License and the information contained herein is true. I understand that knowingly supplying false information on this form is a Class D crime and that any false information will result in the suspension or revocation of any license issued to me.

Signature of Applicant

Date of Application

APPLICATION INFORMATION AND INSTRUCTIONS

Types of Driver Education Instructor Licenses and Endorsements

- ❖ A Class A license authorizes a person to teach both the classroom and behind-the-wheel phases of driver education and when authorized to provide digital instruction for passenger type vehicle (Class C vehicles).
- ❖ A Class B license authorizes a person to teach **only** the behind-the-wheel phase of driver education for passenger type vehicles (Class C vehicles).
- ❖ A truck driver education endorsement to a Class A license entitles a person to teach classroom, behind-the-wheel and range (off-street) driver education for commercial motor vehicles (Class A and/or Class B vehicles). Also, when authorized, to provide digital instruction.
- ❖ A truck driver education endorsement to a Class B license entitles a person to teach **only** the behind-the-wheel and range phases of driver education for commercial motor vehicles (Class A and/or Class B vehicles).

Exemption from License Fee

- ❖ You are exempt from the license fee if you are a driver education instructor who is employed by and providing driver education only in a public secondary school, approved private secondary school, applied technology center or region, or an adult education program that offers driver education. No fee can be charged to your students **and** your students must be given course credit towards graduation. If you qualify for a fee exemption you may **only** provide driver education while employed by an exempt from fee driver education school. If you are exempt from the instructor license fee, you are still required to submit the exam fee and criminal background fee.

Find the section below that applies to the license for which you are applying. Submit all required documents with completed application.

✓ **An initial instructor license applicant**

- ❖ Check/money order made payable to the Secretary of State or complete credit/debit section on next page.
- ❖ Copy of high school diploma or equivalent.
- ❖ Copy of valid first aid card.
- ❖ Copy of driving dynamics certificate taken within the past year.
- ❖ Copy of certificate of completion from the appropriate Introductory Course in Driver Education. (within the past three years)
- ❖ CR-24 Medical Evaluation form if you checked off anything in the Instructor Medical Information section on page 1.
- ❖ If you are applying for a commercial vehicle instructor license, please provide a letter on letterhead from a current or past employer showing 2 years of experience operating the class of vehicle you plan to teach in. The letter must have your name, dates of employment and the class of vehicle you operated.
- ❖ If you do not hold a Maine driver's license you must submit a current copy of a 6 year driving record from the state you hold a valid driver's license.
- ❖ If you hold an out of state driver's license please submit a current copy of your criminal background from that state. (Record must show at least the previous 10 years)

✓ **A renewal instructor license applicant**

- ❖ Check/money order made payable to the Secretary of State or complete credit/debit section on next page.
- ❖ Copy of Proof of Teaching form verifying you taught the required hours in the classroom and/or behind-the-wheel.
- ❖ Copy of certificates verifying proof of attendance of at least 16 hours of continued education.
- ❖ CR-24 Medical Evaluation form if you checked off anything in the Instructor Medical Information section on page 1.
- ❖ If you do not hold a Maine driver's license you must submit a current copy of a 6 year driving record from the state you hold a valid driver's license.
- ❖ If you hold an out of state driver's license please submit a current copy of your criminal background from that state. (Record must show at least the previous 10 years)

✓ **An upgrade instructor license applicant**

- ❖ Copy of certificate of completion from the appropriate Introductory Course in Driver Education. (within the past three years)

✓ **Addition of vehicle type**

- ❖ Check/money order made payable to the Secretary of State or complete credit/debit section on next page for exam fee.
- ❖ If you are applying for a commercial vehicle instructor license, please provide a letter on letterhead from a current or past employer showing 2 years of experience operating the class of vehicle you plan to teach in. The letter must have your name, dates of employment and the class of vehicle you operated.
- ❖ Copy of certificate of completion from the appropriate Introductory Course in Driver Education. (within the past three years, if applicable)

If you have any questions regarding requirements or the application process, please call the Driver Education Program at 624-9000 ext. 52128.

Your application will be reviewed by the Bureau of Motor Vehicles, Driver Education Program to determine whether you meet the licensing requirements. If your application is approved, you will be issued a driver education instructor license which will be mailed to you. Your license will expire two years from the date it is issued. Teaching driver education without a valid license is a Class E crime.

Once you are issued a Driver Education Instructor License it is your responsibility to notify the Bureau of Motor Vehicles, Driver Education Program in writing of any change in information on the instructor license application (e.g., change of name, address, phone number, driving record, criminal record and health). All correspondence and renewal notices will be sent to licensee's last known address on file with the Bureau of Motor Vehicles, Driver Education Program.

Please mail the application, fee and all required documents to the address below:

**Secretary of State
BMV-Driver Education Program
#29 State House Station
Augusta, Maine 04333**

Or fax to: 207-624-9158. Please confirm fax receipt by calling 207-624-9000 ext. 52128



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INSTRUCTOR PAYMENT INFORMATION					
FULL LEGAL NAME	(LAST)	(FIRST)	(MI)	(SUFFIX)	DATE OF BIRTH
PAYMENT INFORMATION					
Please make your check or money order payable to the Secretary of State and mail; application, fee and all required documents to the address on page 2.					
If you choose to pay by credit/debit card please complete this section: Amount to be charged to card _____					
Credit/Debit Number _____ Expiration Date _____					
Name as it appears on credit/debit card _____ Signature _____					