Virginia Driver Training

TWO-YEAR INSTRUCTOR LICENSE APPLICATION

Class A - Commercial Vehicle

Purpose: Use this form to apply for a training school instructor license to train applicants to operate any type of 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: ☐ ORIGINAL FIRST-TIME APPLICATION ☐ RENEWAL	TWO-YEAR LICENSE FEE: $100.00 **NOTE: License will expire with school license**
NAME OF DRIVER TRAINING SCHOOL	

INSTRUCTOR INFORMATION

FULL LEGAL NAME OF INSTRUCTOR (pirnt) (last, first, mi, suffix)				DMV CUSTOMER NUMBER
ADDRESS	CITY	STATE	ZIP CODE	TELEPHONE NUMBER ( )
EMAIL ADDRESS (for online DMV access)				INSTRUCTION LICENSE NUMBER (if renewing)

INSTRUCTOR QUALIFICATIONS AND REQUIREMENTS

1. Must possess a valid Virginia non-restricted interstate commercial driver's license that has been held for three years and which has the appropriate vehicle classes and endorsements for the type of instruction that they will provide.
2. Must possess a high school diploma. **OR**
   - Have at least a year of previous Class A instructing experience. **AND**
   - Have completed a Class A Driver Training Course conducted by the hiring school?
3. Must complete a minimum of 160 hours of Class A instructor training conducted by the hiring school. (completion certificate must be submitted with original applications)
4. Must meet the physical requirements (including any alcohol and drug screening requirements) for commercial drivers as specified in the Federal Motor Carrier Safety Regulations. (must provide CDL medical report)

Do you meet the above requirements? ☐ YES ☐ NO

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 SIGNATURE	DATE (mm/dd/yyy)
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
	☐ CDL MEDICAL REPORT	**ORIGINAL ONLY** (additional requirements)
		☐ 160 HOUR TRAINING COMPLETION