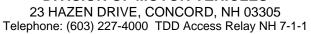


State of New Hampshire DEPARTMENT OF SAFETY DIVISION OF MOTOR VEHICLES





APPLICATION FOR DRIVER EDUCATION INSTRUCTOR CERTIFICATE

PROVISIONAL CERTIFICATI	E (\$25.00)	ARD CERTIFICATE (\$40.00)		
SECTION A (Contact Information)				
Home mailing address:	Home phone number: Cell phone number:			
City, State, Zip:				
	SECTION B (Em	ployment Information	1)	
Please list the scho	ol(s) that you are emplo	oyed by for purposes of ins	structing driver education.	
		City:	Zip:	
		City:	Zip:	
	SECTION C (Drive	er's License Informatio	on)	
Driver's license number: Driver's license class: Have you ever been convicte If yes, please list the conviction	Endorsem	Date of expiration: ents/Restrictions: offense in NH or another sta	ate or country? Yes No s) (Please use additional paper as	
needed.): Are there any court charges	presently pending? Yes	No If yes, where an	nd explain the charges:	

SECTION D (Criminal Background)

Have you ever been convicted of any criminal offense? Yes No If yes, please list conviction date and explain the nature of each offense. (Please use additional paper as needed.):					
Are there any court charges pending? Yes No If yes, where and explain the charges:					
I, THE UNDERSIGNED, HEREBY CERTIFY THAT I AM THROUGHLY FAMILIAR WITH RSA 263 AND THE NH CODE OF ADMINISTRATIVE RULES CHAPTER SAF-C 3100, DRIVER EDUCATION RULES. THIS APPLICATION IS SIGNED UNDER PENALTY OF UNSWORN FALSIFICATION OF SAME IS JUST CAUSE TO DENY YOUR APPLICATION OR TO SUSPEND YOUR CERTIFICATE ALREADY ISSUED UNDER RSA 263:44.					
Signature of applicant:	Date:				
If this application lacks signature or other necessary forms it will be returned. Please return this application with your check (payable to State of NH-DMV), completed current physical form (DSMV 492), or a copy of a valid USDOT medical certificate, a completed criminal and motor vehicle records check (fingerprints are required for initial applicants only) and the necessary professional development forms and documentation.					
NH Division of Motor Vehicles	DMV USE ONLY				
Driver Education Section					
23 Hazen Drive	Fee received:Check #:				
Concord, NH 03305	Certificate #:				
For assistance call: (603) 227-4075	Expiration date:				