



TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157

www.tdlr.texas.gov

UPGRADE SPECIALIZED DRIVER SAFETY INSTRUCTOR LICENSE APPLICATION INSTRUCTIONS

The application must be completed and signed by the applicant. An application is not considered complete and will not be processed until all required items have been submitted. Attachments must be submitted on separate pieces of single-sided, 8½" x 11" paper.

DOCUMENTS SUBMITTED WITH YOUR APPLICATION WILL NOT BE RETURNED. KEEP A COPY OF YOUR COMPLETED APPLICATION, ALL ATTACHMENTS, AND YOUR CHECK OR MONEY ORDER.

1. **NAME** – Write your legal name in the spaces provided. (Last Name, First Name, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. **SOCIAL SECURITY NUMBER** – Social security number disclosure is required by Section 231.302(c)(1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:
www.texasattorneygeneral.gov/child-support or call (512) 460-6000 or (800) 252-8014
3. **EMAIL ADDRESS** – Write your email address. By providing my email address I authorize TDLR to send licensing communications and required notices to me by electronic mail. I understand that I may revoke this authorization in writing and that I must update my email address or I will not receive these notices. I understand that the email address I have provided in this application will remain confidential except as permitted or required by law.
4. **MAILING ADDRESS** – Write your current mailing address. This is the address where we will send you mail. This address can be a post office box. You can add the zip plus-4 to help the postal service deliver mail more efficiently and accurately.
5. **PERSONAL PHONE NUMBER** – Write a telephone number, including the area code, where we can reach you during the day. This may be your office phone number where we can leave a message.
6. **BUSINESS PHONE NUMBER** - Write the telephone number, including the area code, of the business listed.
7. **DRIVER LICENSE INFORMATION** – Write the number on your driver license, the 2-letter state abbreviation it was issued, the class and expiration date shown on the card.
8. **ENDORSEMENT TO BE UPGRADED** – Check the box(s) in the driver safety endorsements you would like to upgrade.
 - Specialized Driving Safety Instructor (**SPDSI**)
 - Specialized Driving Safety Instructor Trainer (**SPDSIT**)
 - Instructor Development Course – Specialized Driving Safety Instructor Trainer (**IDC-SPDSIT**)
9. **STATEMENT OF APPLICANT** - Carefully read the statement before dating and signing your application.

Criteria for Receiving

SPECIALIZED Driving Safety Education Credit

Education requirements include the following:

1. Evidence of completion of education courses shall be provided for each instructor trying to obtain a driving safety upgrade license. A verification form indicating completion shall be provided to TDLR by the instructors. The form shall be signed by the instructor receiving the training and the course provider or designee.
2. A licensee may not receive credit for attending the same course more than once during the same licensing period to obtain an upgrade.

The application shall include the fee and evidence of education completed to upgrade the license. Evidence of educational experience may not be required to be resubmitted if the documentation is on file at TDLR.

SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:

Texas Department of Licensing and Regulation
P.O. Box 12157
Austin, TX 78711-2157

Documents submitted with your application will not be returned. Keep a copy of your completed application, all attachments, and you check or money order. Do not send cash.

For additional information and questions, please visit the Texas Department of Licensing & Regulation website at tdlr.texas.gov or reach Customer Service via webform where you can submit your request for assistance and include attachments needed at <https://www.tdlr.texas.gov/help> or (800) 803-9202 [in state only], (512) 463-6599, Relay Texas-TDD: (800) 735-2989 or Fax: (512) 463-9468. Customer Service Representatives are available Monday through Friday 7:00 a.m. until 6:00 p.m. Central Time (excluding holidays).



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**UPGRADE SPECIALIZED DRIVER SAFETY
 INSTRUCTOR LICENSING APPLICATION**

DO NOT WRITE ABOVE THIS LINE

**UPGRADE APPLICATION FEE: \$25.00
 (FEE IS NON-REFUNDABLE)**

This completed form must be accompanied by all required documents and the application fee

1. Name:

_____ Last Name _____ First Name _____ Middle Name _____ Suffix

2. Social Security Number:

3. Email Address:

See Instruction Sheet for Disclosure Information

Ex: johnndoe@aol.com See Instruction Sheet for Disclosure Information

4. Mailing Address:

(P.O. Box, Number, Street Name/Apartment Number)

City _____ State _____ Zip Code _____

5. Personal Phone Number:

6. Business Phone Number:

Area Code _____ Number _____

Area Code _____ Number _____

7. Driver License #: _____ State: _____ Class: _____ Expiration Date: _____

8. Indicate the endorsement(s) to be upgraded. *(Submit evidence of completion of educational requirements for changes.)*

DRIVER EDUCATION ENDORSEMENTS:

Specialized Driving Safety Instructor (SPDSI): _____
Name of Course or Courses

Specialized Driving Safety Instructor Trainer (SPDSIT): _____
Name of Course or Courses

Instructor Development Course – Specialized Driving Safety Instructor Trainer (IDC-SPDSIT): _____
Name of Course or Courses

EVIDENCE OF COMPLETION FOR UPGRADE MUST BE SUBMITTED

9. STATEMENT OF APPLICANT

By signing this application, I certify all information submitted on this and the attached forms is true and accurate. I understand that providing false information on this application may result in denial of this application or revocation of the license I am requesting and the imposition of administrative penalties. I acknowledge that I am responsible for knowing and following the current laws and rules that govern driver education instruction.

Signature _____

Date _____

Typed or Printed Name of Applicant _____