



# TEXAS DEPARTMENT OF LICENSING & REGULATION

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

[www.tdlr.texas.gov](http://www.tdlr.texas.gov)

## MOTORCYCLE INSTRUCTOR LICENSE APPLICATION INSTRUCTIONS

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** – Provide your legal name in the spaces provided. (Last, First, Middle Name, Suffix) Examples of a suffix include Jr., Sr., and II. (Mr. is not a suffix.)
2. **DATE OF BIRTH** – Provide your birth date.
3. **GENDER** – Select whether you are male or female.
4. **SOCIAL SECURITY NUMBER** – Social Security Number disclosure is required by Section 231.302(c)(1) of the Texas Family Code 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](#) or call (512) 460-6000 or (800) 252-8014
5. **MAILING ADDRESS** – Provide 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.
6. **PHONE NUMBER** – Provide 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.
7. **EMAIL ADDRESS** – Provide 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.
8. **DRIVER LICENSE NUMBER** – Provide the number on your driver license, the listed state on the license, the class, and date the license was issued and will expire. If your driving record does not meet the requirements of 116 T.A.C. §98.21(4) and (5), then your application will be denied. **Submit a clear photocopy of your current, valid driver license.**
9. **EDUCATION** – Select whether you have a High School Diploma or GED.
10. **CERTIFIED CARDIOPULMONARY RESUSCITATION** – You must complete first aid and adult cardiopulmonary resuscitation (CPR) certification from a nationally recognized provider with training courses that require in-person attendance, provide hands-on skills practice, and meet or exceed the standards of the American Red Cross, the American Heart Association, or the National Highway Traffic Safety Administration. **Submit a copy of the CPR/ First Aid certificate of completion.**
11. **INSTRUCTOR PREPARATION COURSE** – Select whether you have completed an instructor preparation course administered by the Texas A&M Engineering Extension Service. **Submit a copy of the certificate of completion of your Instructor Preparation Course.**
12. **FOR OUT OF STATE APPLICANTS** - Select Yes or No, if you have held a motorcycle license issued by another state(s) or jurisdiction.  
If **YES**, a document on official letterhead issued by the state or other jurisdiction will need to be submitted. The letter must state the license has been active and in good standing continuously for the previous year and the applicant has taught both the classroom and range portions of the course at least six times.  
If **NO**, a document on official letterhead issued by the administrator of the course will need to be submitted. The letter must state the applicant's authorization to teach the course has been active and in good standing continuously for the previous year and the applicant has taught both the classroom and range portions of the course at least six times.

13. **CRIMINAL HISTORY** – Indicate if you have ever been convicted of or placed on deferred adjudication for any Misdemeanor or Felony, other than a minor traffic violation. If YES, complete and attach a [Criminal History Questionnaire \(PDF\)](#) for each offense.  
If you are worried your criminal history could prevent you from getting this license, Texas allows you to have your criminal history evaluated before submitting your application and non-refundable fees. To request a criminal history evaluation, submit a [Criminal History Evaluation Letter \(PDF\)](#), a completed [Criminal History Questionnaire \(PDF\)](#) form for each crime you were convicted of or placed on deferred adjudication for and a \$10.00 fee.
14. **DISCIPLINARY ACTION HISTORY** – Indicate if you have ever had a professional license, certification, or registration suspended, canceled, revoked, or denied in any state. If yes, complete and attach a [Disciplinary Action Questionnaire \(PDF\)](#) for each disciplinary action.
15. **STATEMENT OF APPLICANT** – Carefully read the statement of applicant before dating and signing your application.

#### **APPLICATION INFORMATION FOR MILITARY SERVICE MEMBERS, MILITARY VETERANS AND MILITARY SPOUSES**

The Texas Department of Licensing and Regulation recognizes the contributions of our active-duty military service members, their spouses, and veterans. If you want to use one of the licensing options available to military service members, military veterans, and military spouses, please complete the [Military Service Member, Military Veteran or Military Spouse Supplemental Application \(PDF\)](#) and attach it with your license application. If you have additional questions about qualifications, training or experience requirements relating to occupation licensing for military service members, military veterans or military spouses please go to the [TDLR Military Information web page](#).

#### **SEND YOUR COMPLETED APPLICATION AND REQUIRED DOCUMENTS TO:**

TDLR  
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 your check or money order. Do not send cash.

For additional information and questions, please visit the [TDLR website](#) or reach Customer Service via [webform](#). The [webform](#) will allow you to submit your request for assistance and include attachments needed. You may also reach us at (800) 803-9202 [in state only], (512) 463-6599, Relay Texas-TDD: (800) 735-2989. Customer Service Representatives are available Monday through Friday (excluding holidays).

#### **TDLR Public Information Act Policy:**

This document is subject to the Texas Public Information Act. With certain exceptions, information in this document may be made available to the public. For more information, view the [TDLR Public Information Act Policy](#).



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## MOTORCYCLE INSTRUCTOR LICENSE APPLICATION

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

**APPLICATION FEE: \$50.00 (FEE IS NON-REFUNDABLE)**

**1. Name:**

\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Suffix (Jr., Sr., III)

**2. Date of Birth:**

\_\_\_\_\_ Month/Day/Year

**3. Gender:**

Male  Female

**4. Social Security Number:**

\_\_\_\_\_ See instruction sheet for disclosure information

**5. Mailing Address:** (Used to receive mail from TDLR)

\_\_\_\_\_ Number, Street Name, Suite Number/Apartment Number, City, State, Zip Code

**6. Phone Number:**

\_\_\_\_\_ (Area Code) Phone Number

**7. Email Address:**

\_\_\_\_\_ ex: [john.doe@gmail.com](mailto:john.doe@gmail.com) (See instruction sheet for disclosure information)

**8. Have you held a driver license continuously for the last two years?**

Yes  No

Within the preceding three years, have you been convicted of three or more moving violations?

Yes  No

Within the preceding three years, have you been convicted of two or more moving violations that resulted in an accident?

Yes  No

Driver License Number: \_\_\_\_\_

State: \_\_\_\_\_

Class: \_\_\_\_\_

Issue Date: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Month/Day/Year

\_\_\_\_\_ Month/Day/Year

**9. Do you have a High School Diploma or GED?**

Yes  No

**10. Certified Cardiopulmonary Resuscitation (CPR):** (Please include copy of the certificate)

Have you completed First Aid and Adult Cardiopulmonary Resuscitation (CPR) certification from a nationally recognized provider with training courses that require in-person attendance, provide hands-on skills practice, and meet or exceed the standards of the American Red Cross, the American Heart Association, or the National Highway Traffic Safety Administration?

Yes  No

**11. Have you completed an approved Instructor Preparation Course?**

(Please include the Instructor Course Certificate)

Yes  No

**12. For Out of State Applicants Have you held a motorcycle license issued by another state(s) or jurisdiction?**

Yes  No

If **YES**, a document on official letterhead issued by the state or other jurisdiction will need to be submitted. The letter must state the license has been active and in good standing continuously for the previous year and the applicant has taught both the classroom and range portions of the course at least six times.

If **NO**, a document on official letterhead **issued by the administrator of the course** will need to be submitted. The letter must state the applicant's authorization to teach the course has been active and in good standing continuously for the previous year and the applicant has taught both the classroom and range portions of the course at least six times.

**13. Have you ever been convicted of, or placed on deferred adjudication for, any misdemeanor or felony, other than a minor traffic violation?**

Yes  No

If YES, complete and submit a [Criminal History Questionnaire \(PDF\)](#) for each offense.

**See instruction sheet for more information**

**14. Have you ever had an occupational license, certification or registration suspended, revoked, or denied in any state?** (This does not include your driver license)

Yes  No

If YES, complete and submit a [Disciplinary Action Questionnaire \(PDF\)](#) for each offense.

**See instruction sheet for more information**

**15. STATEMENT OF APPLICATION**

By signing this application, I certify all information submitted on this and the attached forms is true and accurate. I authorize TDLR to conduct any investigations of me which it deems prudent. I understand that the information revealed in an investigation may be cause for disapproval of the application even though other requirements for a license have been met. I certify that I have read and will comply with all applicable provisions of Occupations Code, Chapter 51, Transportation Code, Chapter 662, and Texas Administrative Code, Title 16, Chapter 98. 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.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed