



TEXAS DEPARTMENT OF LICENSING & REGULATION

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

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 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/cs 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. **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 for each offense. This form can be obtained from the TDLR website at www.tdlr.texas.gov/MISC/lic002.pdf.
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, a completed Criminal History Questionnaire form for each crime you were convicted of or placed on deferred adjudication for and a \$25 fee. You can find more information on the process and download the necessary forms on the TDLR website at www.tdlr.texas.gov/crimHistoryEval.htm.
13. **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 for each disciplinary action. This form can be obtained from the TDLR website at [www.tdlr.texas.gov/misc/Disciplinary Action Questionnaire.pdf](http://www.tdlr.texas.gov/misc/Disciplinary%20Action%20Questionnaire.pdf).
14. **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 SPOUSE

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 (TDLR form MIL001)** and attach it with your license application. The form is located on the TDLR website at: <http://www.tdlr.texas.gov/misc/militarysupplemental.pdf>.

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 at: <http://www.tdlr.texas.gov/military.htm>.

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 your 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.



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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 Name, 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 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 resulting in an accident? Yes No

Driver License #:

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):

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
Please include the certificate.

11. Have you completed an approved Instructor Preparation Course? Yes No

Please include the Instruction Course Certificate.

12. **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 (CHQ) for each offense. **See instruction sheet for more information**

13. **Have you ever had an occupational license, certification or registration suspended, revoked, or denied in any state?** Yes No

If YES, complete and submit a Disciplinary Action Questionnaire (DAQ) with this application. (This does not include your driver license.)

14.

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, Education code Chapter 1001 and Texas Administrative code Chapter 84. 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