

APPLICATION FOR DRIVER TRAINING INSTRUCTOR

JESSE WHITE • SECRETARY OF STATE

Original app.

Renewal app.

Please type or print

Applicant's Name		Last	First	Middle	Date of Application			
					Mo. _____	Day _____ Yr. _____		
Home Address		City	State	ZIP Code	Home Phone () _____	Social Security No.		
Current Illinois Driver's License No.	Expiration Date	Date of Birth	Place of Birth	City	State	Sex	Height	Weight
Name of Driving School at Which You Will Instruct			Address			Hair Color	Eye Color	

EDUCATION AND MILITARY SERVICE

EDUCATION (Circle highest grade completed).

Grade School

1 2 3 4 5 6 7 8

High School

1 2 3 4

College

1 2 3 4

Name of High School _____ Name of College or University _____

Have you successfully completed a course in Driver Education at an accredited college or university? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, name of college or university	Hours	Date completed	Instructor's name
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Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, dates of service From: _____ To: _____	Branch of service	Type of discharge
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EMPLOYMENT HISTORY

List employment experience for the last five years with the most recent first.

Name of Firm	Address	Type of Work
Dates Employed From: _____ To: _____	Reason for Leaving	
Name of Firm	Address	Type of Work
Dates Employed From: _____ To: _____	Reason for Leaving	

QUESTIONS

You must answer each of the following questions with a "yes" or "no."
All questions answered "yes" must be explained at the bottom of the application.

- | | |
|---|--|
| 1. Have you ever been known by any other name? <input type="checkbox"/> yes <input type="checkbox"/> no | 11. Are you now involved with any charges or court proceedings related to questions 2, 3, 4, 5, 6, 7, 8, 9 or 10? <input type="checkbox"/> yes <input type="checkbox"/> no |
| * 2. Have you ever been convicted of a felony? <input type="checkbox"/> yes <input type="checkbox"/> no | 12. Has your driver's license ever been refused, canceled, suspended or revoked in Illinois or any other state? <input type="checkbox"/> yes <input type="checkbox"/> no |
| 3. Have you ever been convicted of reckless homicide? <input type="checkbox"/> yes <input type="checkbox"/> no | 13. Are there any unsatisfied motor vehicle accident judgments against you? <input type="checkbox"/> yes <input type="checkbox"/> no |
| 4. Have you ever been convicted of driving under the influence of alcohol? <input type="checkbox"/> yes <input type="checkbox"/> no | 14. Have you ever given driver instruction in Illinois for compensation within the past 12 months? <input type="checkbox"/> yes <input type="checkbox"/> no |
| 5. Have you ever been convicted of driving under the influence of illegal drugs? <input type="checkbox"/> yes <input type="checkbox"/> no | 15. Has your driver training school instructor's license ever been denied, canceled, suspended or revoked? <input type="checkbox"/> yes <input type="checkbox"/> no |
| 6. Have you ever been convicted of driving under the influence of prescription drugs? <input type="checkbox"/> yes <input type="checkbox"/> no | 16. Are you currently an administrator and/or teacher of a state approved high school driver education program? <input type="checkbox"/> yes <input type="checkbox"/> no |
| 7. Have you ever been convicted of leaving the scene of a traffic accident involving death or injury? <input type="checkbox"/> yes <input type="checkbox"/> no | 17. Are you currently employed, or have you ever been employed by the Illinois Secretary of State? <input type="checkbox"/> yes <input type="checkbox"/> no |
| * 8. Have you ever been convicted of perjury or making of any false statements relating to any portion of the Illinois Vehicle Code? <input type="checkbox"/> yes <input type="checkbox"/> no | 18. Are you currently licensed as a third-party certification program safety officer by the Secretary of State? <input type="checkbox"/> yes <input type="checkbox"/> no |
| 9. Have you ever been convicted of any traffic violation other than parking violations? <input type="checkbox"/> yes <input type="checkbox"/> no | |
| * 10. Have you ever been convicted of any misdemeanor other than traffic violations? <input type="checkbox"/> yes <input type="checkbox"/> no | |

* Applicants are not obligated to disclose sealed or expunged records of a conviction or arrest.

EXPLANATION OF PREVIOUS QUESTIONS ANSWERED "YES"

TO BE COMPLETED BY TEEN INSTRUCTOR APPLICANTS ONLY

SPECIFIC INSTRUCTION PHASES TO BE TAUGHT (i.e., Classroom Phase or Car/Lab Phase): Instructors may be approved for either one or both phases of instruction. Check below which Phase(s) will be taught. Check also for which category this approval is sought. All experience and education must be fully documented (i.e., transcripts, copies of teaching certificates, licenses and/or letters verifying the precise nature of the education and/or experience), and submitted with this form.

<input type="checkbox"/> Application for Classroom Phase Instructor approval. Check one category for which approval is sought.	<input type="checkbox"/> Application for Car/Lab Phase Instructor approval. Check one category for which approval is sought.
<input type="checkbox"/> 1. State Teacher Certification with a minor (16 semester hours) in the field of safety and driver education as follows: a) Five-semester hours in driver education b) Three-semester hours in general safety c) Eight-semester hours in subjects chosen from two or more of the following related areas: 1. Additional safety course. 2. Advanced psychology and sociology. 3. Health education. 4. Instructional materials.	<input type="checkbox"/> 1. State Teacher Certification with a minor (16 semester hours) in the field of safety and driver education as follows: a) Five-semester hours in driver education. b) Three-semester hours in general safety. c) Eight-semester hours in subjects chosen from two or more of the following related areas: 1. Additional safety course. 2. Advanced psychology and sociology. 3. Health education. 4. Instructional materials.
<input type="checkbox"/> 2. Bachelor's degree with one year of teaching experience, plus successful completion of a 48-hour course (three-semester hours) in the Illinois Driver Education Curriculum.	<input type="checkbox"/> 2. Bachelor's degree with six months of experience teaching behind-the-wheel and adults.
<input type="checkbox"/> 3. Licensed by the Secretary of State, completed a 48-hour course or an equivalent college or university course approved by the Illinois Secretary of State, and two months experience teaching behind-the-wheel and adults.	<input type="checkbox"/> 3. Seven years uninterrupted teaching experience in a commercial driver training school.
<input type="checkbox"/> 4. State Teacher Certification and completed 48-hour instructor course.	<input type="checkbox"/> 4. Licensed by the Secretary of State, completed a 48-hour course or an equivalent college or university course approved by the Illinois Secretary of State, and two months experience teaching behind-the-wheel and adults. <input type="checkbox"/> 3. State Teacher Certification and completed 48-hour instructor course.

As an authorized official of the aforementioned commercial driving school, I authorize the individual named herein to apply for an instructor license for the aforementioned school.

Signature of School Official: _____

The applicant undertakes and agrees that:

- (1) If he/she terminates employment with the driver training school listed herein, he/she will surrender his/her license to instructor for said driver training school immediately.
- (2) If he/she becomes employed by another driving school, he/she will make application for a new instructor's license for said driver training school.

I hereby affirm my understanding that it is a violation of the Illinois Vehicle Code for an individual to make false application or affidavit, to swear or affirm falsely, or to display or present any document that is fictitious or has been unlawfully altered for the purpose of making application for a commercial driving school instructor license. I further affirm that all the information set forth in the foregoing application is true and correct.

Signature of Applicant: _____

Mail completed application to: Office of the Secretary of State, Commercial Driver Training School Section, 1800 W. Hawthorne Ln., West Chicago, IL 60185. A \$70 fee must accompany this application.