



APPLICATION FOR INSTRUCTOR TRAINING PROGRAM

State Form 56758 (R / 9-22)
Indiana Bureau of Motor Vehicles

BUREAU OF MOTOR VEHICLES
ATTN: Driver Education
100 North Senate Avenue, Room N481
Indianapolis, IN 46204
drivereducation@bmv.IN.gov

- INSTRUCTIONS:**
1. Fill out this form in its entirety in blue or black ink.
 2. Submit application and all required documents to the Driver Education Department.

GENERAL INFORMATION

An Instructor Training Program must satisfy the following criteria to qualify as an approved program:

1. Provide at least ten (10) hours of classroom training that meet the standards set forth in 140 IAC 4-4-1.1.
2. Provide a completion certificate to participants upon completion of training.

Documentation required to be provided with application:

1. Detailed description of program and course.
2. Copy of all course materials. Online components will require access to be granted for review, media components will require a copy for review.
3. Sample Copy of Certificate of Completion.

PROGRAM INSTRUCTOR OR CREATOR INFORMATION

Program Instructor or Creator's Name (*last, first, middle initial*)

Program Instructor or Creator's Name (*last, first, middle initial*)

Program Instructor or Creator's Name (*last, first, middle initial*)

Program Instructor or Creator's Name (*last, first, middle initial*)

APPLICANT INFORMATION

Provider's Name

Provider's Telephone

Provider's Website Address

Contact's Name

Contact's Email

Contact's Telephone

Provider's Address (*number and street*)

City

State

ZIP Code

AFFIRMATION STATEMENT

I swear or affirm that the information entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.

Signature of Applicant

Printed Name

Date (*mm/dd/yyyy*)