



TRAFFIC SAFETY DIVISION APPLICATION FOR

DRIVER EDUCATION INSTRUCTOR ORIGINAL CERTIFICATE

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

Before completing this application please review the Rules and Regulations pertaining to licensing, NMAC 18.20.3. The Rules and Regulations can be found on the TSC website under the Licensing tab and Driver Education School Forms. Your signature below will verify that you have taken this action.

- complete this application on your computer by using the TAB key or mouse to advance between fields and then print it out, **or** by typing, **or** by printing legibly in black ink
- provide all information requested in Sections 1 and 2 of the application form
- include copies of all the required documents listed in Section 3 of the application form.
- initial each statement in Section 4 of the application form
- sign and date the application in Section 5 of the application form
- make a copy of the completed application and required documents for your records
- mail all original documents to:

**University of New Mexico
Transportation Safety Center – Licensing Section
MSC07 4030
1 University of New Mexico
Albuquerque, NM 87131-0001**

If you have any questions concerning this application or any of the forms, please contact:

- The UNM Transportation Safety Center (TSC) by email at: TSCdriverprograms@unm.edu or by telephone at 505-277-8771, or 505-277-0961.

WHAT HAPPENS ONCE YOU SUBMIT THIS APPLICATION?

The University of New Mexico Transportation Safety Center (TSC), on behalf of the NMDOT Traffic Safety Division (TSD), will review your application within 15 days to determine if it is complete. Applications will be reviewed in the order in which they are received. ***Applications will not be considered complete until the TSC receives all required documents, including the MVD and DPS reports.***

If the application is **not** complete, the TSC will contact you regarding the missing information or documents. If the TSC does not receive the missing information or documents within 30 days of the date your application was received, your application will be considered inactive. You may resubmit a complete application at any time.

If the TSD does not approve your application, you will receive a letter stating the reasons why it was not approved. If the reasons can be resolved, you may resubmit your application.

If the TSD conditionally approves your application, the TSC will notify you to submit a check made payable to *Traffic Safety Division* in the amount of:

- \$50.00 if you file your application between July 1 and December 31 (for certificates valid more than 6 months)
- \$25.00 if you file your application between January 1 and June 30 (for certificates valid less than six months)

Once the TSC receives the certificate fee, the TSC will issue your Driver Education Instructor certificate on behalf of the Traffic Safety Division.

NO PERSON MAY INSTRUCT A DRIVER EDUCATION SCHOOL CLASS UNLESS AND UNTIL THE TRAFFIC SAFETY DIVISION HAS GRANTED WRITTEN APPROVAL BY ISSUING A DRIVER EDUCATION INSTRUCTOR CERTIFICATE.

➤ ***PLEASE KEEP THESE INSTRUCTIONS FOR FUTURE REFERENCE.***

APPLICATION FOR ORIGINAL INSTRUCTOR CERTIFICATE

Section 1 – Instructor Information

Instructor Name (as you would like it to appear on certificate)	
Instructor Mailing Address (Street Address, City, State, Zip Code)	
Instructor Telephone Number(s)	
Instructor E-mail Address	
Do you have Internet access?	<input type="checkbox"/> yes <input type="checkbox"/> no
Instructor Date of Birth	Social Security #
Name of School Where Employed	
Address of School Where Employed Street Address, City, State, Zip Code	
Name of School Owner/Operator	
I plan to teach: (check all that apply)	Classroom <input type="checkbox"/> Behind-the-Wheel <input type="checkbox"/>

Section 2 – References

Please provide three (3) character and employment references. **At least one of the references must be a present or past employer. Family members may not be used as references.**

1	Name	
	Street Address, City, State and Zip Code	
	Telephone Number	
	Relationship	
2	Name	
	Street Address, City, State and Zip Code	
	Telephone Number	
	Relationship	
3	Name	
	Street Address, City, State and Zip Code	
	Telephone Number	
	Relationship	

Section 3 – Required Documents

Please submit the following documents with this application:

- Applicant's resume or related work history
 - A completed Request for MVD Limited Driving History form can be found on the TSC website in the Driver Education School Forms list. This will enable TSC to obtain the applicant's limited driving history directly. The applicant's original signature is required (if the applicant has submitted an MVD request form with a school license application, the applicant does not need to submit it with this application);
 - A completed Authorization for Release of Information by DPS form can be found on the TSC website in the Driver Education School Forms list. This will enable TSC to obtain the applicant's state criminal background check directly. The applicant's original signature is required. ***This form must be notarized and accompanied by a check for \$15.00 made payable to the Department of Public Safety*** (if the applicant has submitted a DPS request form with a school license application, the applicant does not need to submit it with this application);
 - If you have ever been convicted of or pleaded guilty or no contest to a misdemeanor, traffic misdemeanor or felony, a separate sheet and supporting documentation explaining why each such conviction or plea should not disqualify you from obtaining a license under paragraph 18.20.3.10 A
- A copy of the applicant's health certificate signed by a physician and dated no earlier than sixty (60) days before the date the application is filed with TSC stating that the applicant is free from all communicable diseases. If the applicant will provide behind-the-wheel training, the health certificate must also state that the applicant is free of any ailment, disease, or physical defect that causes momentary or prolonged lapses of consciousness or control, which is or may become chronic, and that the applicant is not suffering from a physical or mental disability or disease that prevents reasonable and ordinary control over a motor vehicle or that could impair the applicant's ability to drive safely or instruct student drivers. (Note: correspondence school instructor applicants do not need to submit a health certificate);
- If applicant is a licensed teacher, a copy of applicant's teaching license from the New Mexico Public Education Department; ***or***
- If the applicant is not a licensed teacher,
 - a copy of a diploma or official transcript evidencing a bachelor's degree from an accredited college or university ***or***
 - a resume with verifiable employment history showing a minimum of 3 years full time experience in driver training or a related field

AND

- a copy of a certificate of satisfactory completion of an Instructor Training Course sponsored or approved by the Traffic Safety Division designed to teach instructional strategies, classroom management, or acquisition of teaching competencies **or**
- a request for a waiver of this requirement until the next scheduled Instructor Training Course.

Section 4 – Sworn Statements

By my initials beside each statement, I _____ certify that:

_____ I have obtained a copy of, have read, and agree to comply with the requirements of, 18.20.3 NMAC, Driver Education Schools, the rule adopted by the Traffic Safety Division regarding the Driver Education School program.

_____ I understand that failure to comply with the requirements of the rule shall be grounds for suspension or revocation of any certificate issued to me by the Traffic Safety Division.

_____ I am in compliance with the Parental Responsibility Act, NMSA 1978, Section 40-5A-1 et seq. regarding paternity or child support proceedings and understand that failure to comply with this Act will result in denial of my application or revocation or suspension of my license.

_____ I will not instruct Driver Education School classes in New Mexico until I receive a Driver Education Instructor certificate from the Traffic Safety Division.

Section 5 – Signature and Date

By my signature below, I certify, under penalty of perjury, that the information given in this application and all accompanying documents is true to the best of my knowledge and ability.

Applicant’s signature _____
Date

Please note that TSD requires an original application for processing. Copies will not be accepted. Please make a copy of this application for your records and submit an original.

TSC Review by _____ Date _____

NMDOT TSD _____ Date _____

Approved Denied Date _____

Reviewer’s Comments: