NMPOT

TRAFFIC SAFETY DIVISION (TSD) APPLICATION FOR

DRIVING SAFETY NEW INSTRUCTOR ORIGINAL CERTIFICATE

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

Before completing this application please review the Rules and Regulations pertaining to licensing, NMAC 18.20.8. The rules can be found on the TSC website under the Licensing tab and Driver Safety Schools. Your signature below will verify that you have taken this action.

_							
	Complete this application by typing, <i>or</i> 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						
	Submit a check made payable to <i>Traffic Safety Division</i> in the amount of:						
	□ \$50.00 if you file your application between November 1 and April 30						
	(for certificates valid more than 6 months)						
	□ \$25.00 if you file your application between May 1 and October 31						
	(for certificates valid less than 6 months)						
	Make a copy of the completed application and required documents for your records						
	Mail all documents to:						
	University of New Mexico						

University of New Mexico
Traffic Safety Center
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 Traffic Safety Center by telephone at 505-546-9876 or by email at TSCdriverprograms@unm.edu

WHAT HAPPENS ONCE YOU SUBMIT THIS APPLICATION?

The UNM Traffics Safety Center (TSC), on behalf of the Traffic Safety Division (TSD), will review your application within 15 business days to determine it is complete. Applications will be reviewed in the order in which they are received. *Applications will not be considered complete until 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 the 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.

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

> PLEASE KEEP THESE INSTRUCTIONS FOR FUTURE REFERENCE.

APPLICATION FOR ORIGINAL (NEW) INSTRUCTOR CERTIFICATE

Section 1 – Instructor Information

Inst	ructor Name				
(as you would like it to appear on certificate)					
	ructor Mailing Address (if differ	rent from			
	lress of School Where				
-	ployed, below)				
	Street Address, City, State, Zip C	Code			
Inst	ructor Telephone Number(s)				
Inst	ructor E-mail Address				
	you have Internet access?				
Inst	ructor Date of Birth				
Nan	ne of School Where Employed				
Add	lress of School Where Employed	d			
S	Street Address, City, State, Zip C	Code			
Nan	ne of School Owner/Operator				
Spe	cials		☐ 6hr	☐ 8hr	☐ Distance Learning
				•	
Sect	tion 2 – References				
555					
Dlea	se provide three (3) character ar	ad employ	omant refere	nege	
1 ICa	ise provide unee (3) character an	iu empio	ylliciit icicic	nces.	
At least one of the references must be a present or past employer.					
	mily members may <u>not</u> be use			t timpioyer.	
	mily members may <u>not</u> se use	u up i cio.	CHCC.		
1	Name				
_	Street Address, City, State,				-
	Zip Code				
	Telephone Number				
	Relationship				
	Telusian				
2	Name				

	Str	et Address, City, State,				
	Zip	Code				
	Tel	ephone Number				
	Re	ationship				
3	Na	me				
	Str	eet Address, City, State,				
		Zip Code				
	Telephone Number					
	Relationship					
Section 3 – Required Documents Please submit the following documents with this application:						
		A completed <i>Request for MVD Limited Driving History</i> form. This form can be found on the TSC website on the Driving Safety School Forms list. This will enable the TSC to obtain the applicant's limited driving history directly. The applicant's original signature is required;				
		A completed Authorization for Release of Information by DPS form. This form can be found on the TSC website on the Driving Safety School Forms list. This will enable the TSC can obtain the applicant's state criminal background check directly. The applicant's original signature is required. This form must be <u>notarized</u> and accompanied by a check for \$15.00 made payable to the <u>Department of Public Safety</u> ;				
		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 18.20.8.16 (E);				
		A copy of the applicant's health certificate signed by a physician and dated no earlier than <u>sixty (60) days</u> before the date the application is filed with the TSC stating that the applicant is free from any chronic communicable diseases (distance learning instructor applicants do not need to submit a health certificate);				
		A copy of the applicant's resume or curriculum vitae indicating a school and/or work history;				
		A copy of the applicant's high school diploma and/or transcripts from any postsecondary educational or training institutions you have attended; <i>and</i>				

>	➤ I will not instruct Driving Safety students in New Mexico until I have received a Driving Safety Instructor certificate from the Traffic Safety Division.							
Signed	d:							
>	➤ I understand that I <u>must</u> complete a Bureau sponsored or approved Teaching Techniques Training within one year of certification or a Bureau to be eligible for re-certification per NMAC 18.20.8.16 (F)(1).							
Signed	d:							
Sectio	on 5 – Signature and Date							
	• • • • • • • • • • • • • • • • • • • •	of perjury, that the information given in this rue to the best of my knowledge and ability.						
Applic	cant's signature	Date						
	note that TSD requires an original application for profit this application for your records and submit an original application for profit application for your records and submit an original application for profit application for your records and submit an original application for your records and your records and your records and your records are application for your records are application for your records and your records are application for your records are application.	rocessing. Copies will not be accepted. Please make a ginal.						
TSC R	Review by	Date						
NMD	OT TSD	Date						
Review	□Approved wer's Comments:	□Denied						