

# Application for a Trainee Licence to give Instruction in the Driving of a Motor Car for the Purpose of Passing Part C of the Approved Driving Instruction Course

Please complete in BLOCK CAPITALS and in black ink

## Personal Details

1. Surname:  Mr/Mrs/Miss/Ms  
(Delete as necessary)
2. Forename(s):
3. Address:   
  
 Postcode
4. Telephone Number:  Yes  No
5. Have you held a full driving licence, or a foreign licence<sup>1</sup> for a period mounting in the aggregate to at least 4 years in the past 6 years? (After passing driving test any unexpired portion of a provisional licence counts towards 4 year period).
6. Give the name and address of the establishment from which you will give instruction under the licence:
- Name:
- Address:   
  
 Postcode
- Name of sponsoring ADI or Tutor:
7. Date Part A of Theory Test Passed:  /  /
8. Date Part B of Practical Driving Test Passed:  /  /
9. Please enclose proof of minimum 40 hours tuition undertaken with your Sponsor.

## Application

10. I apply for a licence to give driving instruction. I accept the conditions under which any licence would be granted and enclose £100.00.  
Remittances should be in the form of crossed cheques and made payable to "Isle of Man Government".

<sup>1</sup> "Foreign licence" means a document issued under the law of a country outside the Isle of Man and authorising you to drive a motor vehicle in that country.

## Declaration

11. I declare that I have checked the above particulars and that these are correct to the best of my knowledge and belief.

Signature of Applicant:

Date

## Declaration and Undertaking by the Manager/Owner of the Establishment Named in item 6

12. I declare that I have read and accept the conditions under which any licence would be granted and that:

- a) at the date of signing this declaration the ratio is being observed at the address given in item 6
- b) the grant of a licence will not breach the ratio, and I undertake that at no time during the currency of the licence will the ratio be breached

Signature of Proprietor/Manager:

Name in BLOCK CAPITALS

Date

## Notes

**Section 6. There must be at least one Approved Driving Instructor, whose name has been on the ADI register for at least 3 years, working at an establishment for every licence holder working there. Please state the name of the Tutor in relation to this application. The licence is not valid for use from any other address.**

**Section 12. Must be signed by the manager or owner of the establishment from which the applicant will be giving instruction under the trainee licence.**

## Penalty

**An applicant who, for the purpose of securing registration, knowingly makes a false statement or who gives instruction without being in possession of a licence is liable to a fine not exceeding £1,000.**

**Registrar of Approved Driving Instructors  
Sea Terminal Building  
Douglas, Isle of Man, IM1 2RF**

**Switchboard: (01624) 686600  
Direct Line: (01624) 686687  
Fax: (01624) 686920**