

Wyoming Motorcycle Safety Program

Instructor Candidate Application

Print or Type the following information

Application Deadline April 19, 2024

Personal Information:

Name: _____

Mailing Address _____

Cell # _____ Email Address _____

DL number/state _____

Date of Birth _____ Social Security # _____

Employer _____ Occupation: _____

Do you regularly ride a motorcycle? YES NO

How many years have you been a motorcyclist? _____

How many years have you had a motorcycle license or endorsement? _____

Have you ever had your driver license revoked or suspended? YES NO If yes, when? _____

Why? _____

What motorcycle(s) do you currently own? _____

What motorcycle have you ridden MOST OFTEN in the last three years, and approximately how many miles did you ride this motorcycle LAST year? _____

What motorcycle have you ridden the MOST MILES in the last three years, and approximately how many miles did you ride this motorcycle LAST year? _____

Have you completed any of the following motorcycle safety courses?

Basic RiderCourse (BRC)	YES	NO	Basic RiderCourse 2 (BRC2)	YES	NO
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Advanced RiderCourse	YES	NO	On-Street Course	YES	NO
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Motorcycle RiderCourse (MRC:RSS)	YES	NO	Exerienced RiderCourse (ERC)	YES	NO
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If yes to any, when and where

Are you now, or have you been previously certified as an Instructor or RiderCoach by the MSF? _____

If yes, what is (was) your ID number and when did (or does) your latest certification expires?

How did you hear about Wyoming's Motorcycle Safety Program's Instructor Preparation Course?

Education:

High School Graduate or GED? YES NO

College or University Graduate? YES NO

List any educational institutions you have attended or any specialized training you have received.
Please be sure to list certificates or advanced degrees.

Additional Information:

Describe in detail why you want to become a RiderCourse instructor. Use additional paper as needed.

Give a brief description of any other teaching experience.

This application does not guarantee a position in the Instructor Preparation Course. We will contact you at a later date about attending a qualification class.

Signature _____ DATE _____

Return completed application Jennifer.goodrich@wyo.gov or you can print and mail to:

WYDOT Motorcycle Safety Program

Attn: Jennifer Goodrich

5300 Bishop Blvd

Cheyenne WY 82009-3340

307-631-3267