



Driver & Vehicle
Standards
Agency

Application for MOT Managers' Course

Who should attend this two day course?

- ▶ **If you are a Company, Partnership or Designated Council** - The person with direct responsibility for MOT Operations at the Vehicle Testing Station (VTS)
- ▶ **If you are an individual** - The person listed on the VT01 as Authorised Examiner

For further guidance please refer to 'The MOT Testing Guide' section B

Please note: The MOT Managers course **DOES NOT** enable you to become a Nominated Tester. If you wish to become a Nominated Tester, please complete a VT78 application form.

Why are you applying for this course? (Please tick box)

- 1. New authorisation**
The training is free of charge for one person per authorisation. The cost of training for additional applicant will be £253 + VAT at prevailing rate.
- 2. Change in authorisation**
Before applying you must have informed your local area office of the changes and completed a new VT01.
- 3. Replacement of existing AEDM**
Before applying you must have informed your local area office of the changes and the applicant must have received the AEDM role.
- 4. Additional AE training requested**
Cost of training is £253 + VAT at prevailing rate. Payment must be received before the course takes place.
- 5. Area office recommended**
(Official use only)
- | | | | |
|-------------------|----------------------|------------------------|----------------------|
| Area
signature | <input type="text"/> | Name
(please print) | <input type="text"/> |
|-------------------|----------------------|------------------------|----------------------|
- 6. Cessation**
Before applying you must have completed a new VT01.

Data Protect Act 1988

The personal information you have provided on this form will be used by DVSA to process your application for training under the MOT scheme. Once your application has been processed you will be contacted by email in order for you to choose the relevant course. Your information will not be transferred outside the EEA and will not be shared with any third parties except where required in accordance with the law. For further information on our privacy policy, visit our information Charter available from DVSA's website: www.gov.uk/government/organisations/driver-and-vehicle-standards-agency/about/personal-information-charter

Please complete in BLOCK CAPITALS

AUTHORISED EXAMINER (AE) DETAILS

EXPLANATORY NOTES

AE number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
VTS number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
VTS name	<input type="text"/>						
VTS address	<input type="text"/>						
	<input type="text"/>						
VTS postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
VTS tel no. incl area code	<input type="text"/>						
VTS email address	<input type="text"/>						

If you do not know your AE or VTS number, please contact your local DVSA office.

Complete exactly as on VT01.

All correspondence will be sent to this address.

Please complete. We may need to phone you to check details and arrange course dates.

Please complete in full.

APPLICANT DETAILS

	(Circle as appropriate) Mr / Mrs / Miss / Ms	Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	Forenames	<input type="text"/>						
Home address	<input type="text"/>								
	<input type="text"/>								
Postcode	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Job title	<input type="text"/>							
Email address	<input type="text"/>								
Signature	<input type="text"/>	Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Driving licence no. if held	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

We may take disciplinary action if, at any time, we find that a false declaration has been made on this form. Cancellations must be made in writing to DVSA Training Services at the address below.

PROTECTED CHARACTERISTICS

Do you consider yourself disabled under the Equality Act 2010? Yes No

(If you are unsure, the Jobcentre can give you information about the Equality Act)

Do you require reasonable adjustment to be put in place for attendance? Yes No

If YES, please give details below:

COURSE DETAILS

Upon receipt and acceptance of your application, a welcome email and a separate password email which will be sent to the personal email address entered in the Applicant Details of this application.

Please note that failure to supply an email address in Applicant Details will add unnecessary delay to your booking and any subsequent correspondence regarding your training.

Using the link provided in the welcome email, you will be able to view all available courses, and book yourself a suitable date and location.

Please return this form to: DVSA Training Services, Booking Section, Berkeley House, Croydon Street, Bristol BS5 0DA or email: mot.coursebooking@vosa.gov.uk