

Part 1. Application for Driver CPC Periodic Training.

Please note that any information you provide will be submitted to the RSA in order to record your attendance and participation on this training course as part of the 35 hour (7 hours per year) requirement towards the Driver Certificate of Professional Competence.

1. Title	<input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Mr
2. First name	
3. Surname	
4. Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
5. Home Address:	
6. Daytime telephone number:	
7. Mobile telephone number	
8. Email Address (if applicable)	
9. Date of Birth	
10. Country of Birth	
11. PPSN	
12. Driver Number – <i>if using an Irish licence (Find as a 9 digit number in black print on your driving licence)</i>	
13. Non Irish Driver Licence Number – <i>if using a Non Irish Licence</i>	
14. Licence Category: <i>✓ to indicate the relevant category / categories you hold</i>	
C <input type="checkbox"/> C1 <input type="checkbox"/> EC <input type="checkbox"/> EC1 <input type="checkbox"/> D <input type="checkbox"/> D1 <input type="checkbox"/> ED <input type="checkbox"/> ED1 <input type="checkbox"/>	

Part 2. Driver CPC Training Module

✓ Please indicate which module you wish to complete on this occasion:	
	Control of Vehicle and Eco Driving Techniques (CVEDT)
	Minimising Risks and Managing Emergencies in the Transport Industry (MRMET)
	Health and Safety of the Professional Driver (HSOPD)
	Role of the Professional Driver in the Transport Industry (RPDTI)
	The Professional Truck Driver (PROTD) <i>Required for Truck Drivers only</i>
	The Professional Bus Driver (PROBD) <i>Required for Bus Drivers only</i>

Please note the onus is on the driver to complete one module from list above in each 12 month period.

Driver Declaration:

I agree to the release of personal information as given by me above to the Road Safety Authority for the purpose of recording my attendance and participation on the Driver CPC Training Course as indicated above.

Signed: _____

Date: _____