

Colorado State Patrol

Motorcycle Operator Safety Training (MOST) Instructor Application

Colorado State Patrol MOST, 15055 S. Golden Road, Golden, CO 80401 Phone 303-273-1844

E-mail completed applications and direct inquiries to the Colorado State Patrol:

cspmost@state.co.us



COLORADO
State Patrol

Department of Public Safety

New Application

Renewal Application

Note: Complete and attach Form DR 2559 as well as a copy of your current MSF or other Instructor Cert card with this application.

Applicant			Age			
Date of birth (mo./day/yr.)		Work phone	Personal/cell phone			
Mailing address		Colorado driver's license no.				
Apartment Number		Expires (mo./day/yr.)				
City	State	Zip code	E-mail address (required)	Enter E-Mail Address Again		
1. Do you have a motorcycle license endorsement?			<input type="checkbox"/>	<input type="checkbox"/>		
2. Have you been convicted of any offense which is assigned 8 or more points on your drivers license within the past 3 years?			<input type="checkbox"/>	<input type="checkbox"/>		
3. Has your driver's license been revoked or suspended by Colorado or any other state within the past 3 years?			<input type="checkbox"/>	<input type="checkbox"/>		
4. Have you ever been convicted of any offense which involved tampering with a government document?			<input type="checkbox"/>	<input type="checkbox"/>		
5. Do you hold an Instructor Certification from the Motorcycle Safety Foundation?			<input type="checkbox"/>	<input type="checkbox"/>		
a. MSF cert. no. _____						
b. Date issued _____ valid until _____						
	month	day	year	month	day	year
6. Do you hold any other Motorcycle Safety Instructor Certification? If yes complete:			<input type="checkbox"/>	<input type="checkbox"/>		
a. From whom _____						
b. Date issued _____ valid until _____						
	month	day	year	month	day	year
7. List the location, site administrator/sponsor, and dates of at least two Basic Rider Courses (BRC) or Experienced Rider Courses (ERC) you instructed in the previous year. Note: In order for a current instructor to be re-certified for the next calendar year, that instructor must have taught a minimum of two MOST classes the previous year - one of which must have been the BRC.						
Range location		Sponsor	Date	<input type="checkbox"/>	<input type="checkbox"/>	
Range location		Sponsor	Date	<input type="checkbox"/>	<input type="checkbox"/>	

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8. Name(s) of sponsor contractor(s):

9. Personal Development Workshop(s) (PDW): Per Rule and Regulation (10.3.10):

Have you completed the required PDW for this certification period?
Please list the PDW that you completed and the completion date.

If the required PDW has not been completed yet, you can still submit your application. Certification expires on February 28th, so you have until then to submit. Once the PDW is complete send the information to the MOST Program Coordinator. The application will not be approved until the required documentation has been presented to the MOST Program Coordinator.

AS AN INSTRUCTOR, I AGREE TO (check all boxes):

- Exhibit safe riding practices at all times
- Wear all protective clothing listed while operating a motorcycle during the conduct of courses:
 - Helmet
 - Gloves
 - Long-sleeved clothing
 - Low-heeled, over the ankle footwear
 - Eye protection
- Keep my motorcycle(s) in safe operating condition in accordance with guidelines followed by MOST
- Conduct the Colorado Motorcycle Operator Safety Training course in accordance with program guidelines
- Be able to demonstrate all riding exercises
- At no time operate a motorcycle intoxicated
- Keep current on latest professional information while instructing

I acknowledge that I am to abide by all regulations, policies and procedures established in the Motorcycle Operator Safety Training program.

Furthermore, I understand that any violation of said regulations, policies and/or procedures could result in my immediate dismissal from the Motorcycle Operator Safety Training program.

Instructor Name

Date

By adding my name above and submitting this form to the Colorado State Patrol, I declare under the penalty of perjury and all applicable state and federal laws, that all information supplied and all statements made on this form are true and accurate to the best of my knowledge.