



**APPLICATION FORM**  
**Position available: Driving Instructor**

**IMPORTANT:**

**The person "MUST" be:**  
**Fluent in English and Spanish**

Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Age: \_\_\_\_\_      Gender: M( ) F( )  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: FL      Zip: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_      Cell: ( \_\_\_\_\_ ) \_\_\_\_\_  
Status: Single( )    Married( )    Divorced( )    Other( )  
Do you have kids? No( )    Yes( ) If yes, how many \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Florida Driver License # \_\_\_\_\_  
Date available: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Are you a Citizen? Yes( ) No ( )  
If no, are you legally authorized to work in the U.S.? Yes ( ) No ( )

Have you ever been convicted of a felony? Yes ( ) No( )  
If Yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
(Use a separate paper if needed)

Have your license been suspended, revoked and/or canceled in the last 36 months (3 years)?  
Yes ( ) No ( )  
If Yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
(Use a separate paper if needed)



Select the language(s) you are fluent in:

English     Spanish     Portuguese     Italian     French

Other: \_\_\_\_\_

List 3 personal references:

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

**If you have any question to fill this application, please call us at 305-865-5688.**

**When the application is ready, please send it via fax at 305-397-1572**