

Michigan Department of State
Licensing Unit
Lansing, MI 48918

Driver Education Instructor Employment Form

Provider Name: _____

Provider Certification Number: _____

- Hire instructors who possess a current driver education instructor certificate issued by the Department of State.
- Instructors must provide you with a copy of their instructor certificate.
- Use Part A below to report new driver education instructors employed by your organization.
- Use Part B below to report driver education instructors who are no longer employed by your organization.

Part A: The certified instructor(s) named below are newly employed at my/our organization.

Full Name of Instructor (as indicated on certificate)	Certification Number	Date of Employment

Part B: The certified instructor(s) named below are no longer employed by my/our organization.

Full Name of Instructor (as indicated on certificate)	Certification Number	Date of Termination

Printed Name of Provider Representative

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Phone Number

Signature of Provider Representative

Date