

**Section 1 - Provider Information** 

## Safe Driving Course Provider Application

Use this form to apply to be an approved safe driving course provider. Courses will meet personal driver license reinstatement requirements.

Email course materials along with the application to: <u>SDCP@dol.wa.gov</u>. Course materials can be links or attached documents.

We cannot process your application if it is incomplete or course materials are missing.

Provider name		Provider representative		
Owner name	Email		10-digit phone number	
Address (Street, City, State, ZIP code)				
section 2 - Provider Cou	ırse Information			
Course name	Course length	Course delive	ery method*	
via virtual meeting software such as Zo present)	oom where instructor is present; Self-P	-	or is present; Virtual - instruction delivere via the internet where an instructor is NO	
Answer the following  1. Describe below how you villowerd.		or example, check the dri	iver's license or state issued	
<ol><li>If you are not conducting integrity of the assessmer</li></ol>		t proctoring methods are	in place to ensure the	

## **Section 4 Course - Curriculum & Content**

All courses must include the topics listed below. Providers must provide the resource and location of each topic within their curriculum, the time spent instructing on a topic and the method of assessment for evaluating understanding of each topic.

Course Content	Resource and Location	Duration of Topic	Assessment Method
i.e: Dangers of driving at excessive speeds	i.e. PowerPoint "Aaahh I'm late!"	i.e. 30 minutes	i.e. Group Activity
Dangers of driving at excessive speeds			
Dangers of right-of-way violations including merging, improper turns, roundabouts, intersections			
Dangers of distracted driving			
Dangers of improper passing and following vehicles too closely			
Dangers of aggressive driving			
Dangers of fatigued driving			
Passenger safety to include child restraints and seatbelt use			
Operating around vulnerable road users			
Hazard awareness: maintenance & emergency, school zones, constructions zones, weather conditions			
Dangers associated with impaired driving including prescription and over-the-counter drugs, as well as other illicit substances			

I declare under penalty of perjury under the law of Washington at the foregoing and all attachments are true and correct.

X		
TYPE or PRINT signature	Date	

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