

Motorcycle Safety Program Course Completion Report

Motorcycle training schools use this form to document the information needed to apply for a subsidy reimbursement through the Washington State Motorcycle Safety Program (WMSP). You must submit this form along with a completed <u>State of Washington Form A 19-1A Invoice Voucher</u>.

Class information

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Name of school			School contract number (K-xxxx)			
Class number	Course name					
Training site location			Class start date		End date	
1 Instructor name			WMSP instructor number		Hours taught	
2 Instructor name		WMSP instructor n	number	Hour	s taught	
Instructor name		WMSP instructor number		Hours taught		
4 Instructor name		WMSP instructor n	umber	Hour	s taught	

Student information

Last name	First name	Date of birth	Phone number	State	Driver license number	Subsidy Yes/No	Military Yes/No	Status Pass/Fail/ Incomplete

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Last name	First name	Date of birth	Phone number	State	Driver license number	Subsidy Yes/No	Military Yes/No	Status Pass/Fail/ Incomplete
Course notes								