



SCHOOL/ORGANIZATION APPLICATION – Motorcycle Skills Test Waiver Program

Wisconsin Department of Transportation
MV3573 3/2019 Ch. 343.16 Wis. Stats.

A copy of the original Motorcycle Safety Foundation (MSF) RERP site letter must be attached to this application.

MotorcycleSafety@dot.wi.gov

Application Type Original Renewal Change Reinstatement				Application Date (m/d/yyyy)		
School/Organization Name (exactly as it appears on license)						
Address, City, State, ZIP Code						
Special Mailing Address (if different from above)						
*MSF RERP Site Approval Number			Authorization Date (m/d/yyyy)			
Course(s) you are certified by MSF/WMSF to instruct (check all that apply) BRC 3WBRC BRC 2 ARC UBBRC						
Business (Area Code) Telephone Number / Ext.			Business			
Owner/Manager/Coordinator (O/M/C) Name			O/M/C Email Address			
O/M/C Telephone Number / Ext.		O/M/C		O/M/C Cell Number		
Support Staff Name			Support Staff Email Address			
Support Staff Telephone Number / Ext.		Support Staff		Support Staff Cell Number		
Lead Instructor Name			Lead Instructor Email Address			
Lead Instructor Telephone Number / Ext.		Lead Instructor		Lead Instructor Cell Number		
In accordance with Trans. 129.21(1)(a) and (c), a commercial rider education school shall maintain insurance. Please complete the following insurance information.						
Name of Insurance Company				Policy Effective Date	Policy Expiration Date	
In accordance with Trans 129.21(2) and/or (4), a commercial rider education school shall maintain either obtain and maintain a valid surety bond or provide an acceptable alternative.						
Name of Bond Company			Continuous Bond	Policy Effective Date	Policy Expiration Date	
0–300 Completion Slips Signed (in the prior period) \$20,000 Bond		301–1100 Completion Slips Signed (in the prior period) \$30,000 Bond		1100+ Completion Slips Signed (in the prior period) \$40,000 Bond		
Thoroughly complete the following based on the location/ranges and the courses that are offered at each (attach additional paper if needed).						
1.	Site Number	Address		City	ZIP Code	Yes, Classroom is at this location
	BRC 3WBRC BRC 2 ARC UBBRC					
2.	Site Number	Address		City	ZIP Code	Yes, Classroom is at this location
	BRC 3WBRC BRC 2 ARC UBBRC					
3.	Site Number	Address		City	ZIP Code	Yes, Classroom is at this location
	BRC 3WBRC BRC 2 ARC UBBRC					
4.	Site Number	Address		City	ZIP Code	Yes, Classroom is at this location
	BRC 3WBRC BRC 2 ARC UBBRC					
5.	Site Number	Address		City	ZIP Code	Yes, Classroom is at this location
	BRC 3WBRC BRC 2 ARC UBBRC					

See Required Instructor Information next page (2)

SCHOOL/ORGANIZATION APPLICATION – Motorcycle Skills Test Waiver Program *(continued)*

Wisconsin Department of Transportation MV3573

The school/organization named on this document:

1. Requests authorization to participate in the Motorcycle Skills Test Waiver program as authorized by ss.343.16 (2)(cm) Wis. Stats. and interpreted in Trans 129, Wis. Admin. Code 129;
2. Agrees to conform to all provisions of Trans 129.

X

(Authorized Representative – Print Name)

(Authorized Representative Signature)

(Authorized Representative – Print Title)

(Date Signed – m/d/yyyy)

RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
1 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
2 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
3 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
4 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
5 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
6 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
7 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
RiderCoach Name:						Instructor Number:
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
8 Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC
Site #:	Course instructed at this site:	BRC	3WBRC	BRC 2	ARC	UBBRC