



STATE OF MISSISSIPPI  
DEPARTMENT OF PUBLIC SAFETY



**Request for Mississippi Driver's Education Instructor Course**

**Application Process**

1. Complete application.
2. Submit application to [DEInstructorCourse@dps.ms.gov](mailto:DEInstructorCourse@dps.ms.gov) .
3. Receive application approval by e-mail.
4. Mail a check for \$175 before your course. More information on the due date will be sent via e-mail once your application is approved.
5. The certificate of completion will be issued on the last day of the course.

Applicant's Information:			
Last:	First:	Middle:	Suffix:
Date of Birth (Mo/Day/Year):		Driver License Number:	
Residential Address:			
Street 1:		City:	
Street 2:		State:	Zip:
Cell Phone:			
Email Address:			
Date of course requesting: (available course dates can be found on our website)			

**How do you plan to use this certification? (REQUIRED)**

**Examples: Are you planning to teach in a public school?**

**Are you planning to teach in a private school?**

**Are you planning to start a driving school?**

**Are you attempting to gain your 114 endorsement on your teaching license?**

**Do you currently hold a valid MDE teaching license?**

**If yes to the above, does your license include the 114 endorsement?**

**If yes to both above, are you actively teaching Driver's Education in a public school?**

**AFFIRMATION/SIGNATURE:**

I DO SOLEMNLY SWEAR/AFFIRM THAT, UNDER THE PENALTIES OF PERJURY, I AM THE PERSON NAMED AND DESCRIBED HEREIN AND THAT THE STATEMENTS ON THIS APPLICATION ARE TRUE AND CORRECT. ALSO, BY SUBMITTING THIS APPLICATION, I AFFIRM THAT THE LICENSE CLASS I HAVE REQUESTED IS REPRESENTATIVE OF THE VEHICLE CLASS I INTEND TO DRIVE. FURTHER, I UNDERSTAND THAT, IF I CURRENTLY HOLD A COMMERCIAL DRIVER LICENSE BUT HAVE NOT SELECTED A SIMILAR CDL LICENSE, I WILL BE DOWNGRADED TO A REGULAR LICENSE.

I FURTHER UNDERSTAND THAT BY SIGNING THIS DOCUMENT, I HAVE SECURED LIABILITY INSURANCE FOR THE VEHICLE I INTEND TO DRIVE.

\_\_\_\_\_  
USUAL Signature of Applicant

\_\_\_\_\_  
Date

**Submit application to [DEInstructorCourse@dps.ms.gov](mailto:DEInstructorCourse@dps.ms.gov).**

**Please send as a PDF attachment.**