

Application for MOT Managers Course

Who should attend this two day course? If you are a Company, Partnership or Designated Council - The person with direct responsibility for MOT Operations at the Vehicle Testing Station (VTS) If you are an individual - The person listed on the VT01 as Authorised Examiner For further guidance please refer to 'The MOT Testing Guide' section B Please note: The MOT Managers course DOES NOT enable you to become a Nominated Tester. If you wish to become a Nominated Tester, please complete a VT78 application form. Why are you applying for this course? Please tick box **New VTS** Before applying, you must have approval in principle or a VTS number from your local Area Office The training is free of charge for one person per new VTS. The cost of training for additional applicants will be £220 + VAT (£253 inclusive of VAT) Cheques should be made payable to "V.O.S.A." and should be attached to this form 2. **Change in Authorisation** Before applying you must have informed your local area office of the changes and completed a new VT01 3. **Existing trained AE left** Before applying, you must have informed your local area office of the change **Additional AE training requested** 4. Cost of training is £220 + VAT (£253 inclusive of VAT). Payment must be received before the the course takes place 5. **Area Office Recommended** Form must be signed by a Vehicle Examiner (see below) **Official Use Only** VE signature and code Name (please print) **Data Protection Act** The personal information you provide on this form will be used for the purposes of VOSA's statutory functions. It will not be disclosed to other organisations unless required or permitted by law. For further information, visit our Information Charter available from VOSA's website: www.vosa.gov.uk **Training Services Use Only** Signature Date attended course

Please complete in BLOCK CAPITALS							
VEHICLE TESTING STATION (VTS) DETAILS				EXPLANATORY NOTES			
VTS number					If you do not know your VTS number, please contact your local VOSA office.		
VTS name					Complete exactly as on VT01		
VTS address		All correspondence will be sent to this address.					
VTS postcode							
VTS telephone no. including area code				Please complete. We may need to phone you to check details and arrange course dates.			
APPLICANT DETAILS							
Mr / Mrs / Miss	s / Ms	Date of Birth	D D	M	MY	Y	
Surname		Fore	names				
Home address							
Postcode	Job Title						
Signature	Driving Licence No. if held						
Date	Driving Licence No. II field						
We may take disciplinary action if, at any time, we find that a false declaration has been made on this form. Cancellations must be made in writing to VOSA Training Services at the address below.							
COURSE DETAILS							
Please indicate your preferred training location and when you would like your course. We cannot guarantee we will be able to provide a course at your preferred location in the time span indicated, but we will make every effort to do so.							
EDINBURGH	NEWCASTLE	LEEDS	CHADDE	RTON	BOURNEMOUTH		
BIRMINGHAM	WATFORD	MITCHAM	BRIST	TOL	BRIDGEND		
THETFORD	INVERNESS	CANTERBUR	GLASO	SOW	NEWBURY		
EXETER	LINCOLN	DERBY	QUEENSI	FERRY			
Timing							
Urgent - will a	accept cancellation	Within 4 weeks	4-8	weeks	Over 8 weel	(S	
Dates NOT available e.g. holidays Please return this form to:- VOSA Training Services, Booking Section, Berkeley House, Croydon Street,							

Bristol, BS5 ODA