

# Motorcycle licence/learner permit or check ride application



Please complete the front of this form, print clearly in ink using BLOCK letters, cross where applicable, show us your evidence of identity (check requirements at [vicroads.vic.gov.au](http://vicroads.vic.gov.au)) and then sign below in the presence of an authorised officer.

OFFICE USE ONLY

Vic. licence no.																				
Date of issue		D	D	M	M	Y	Y	Y	Y	Y	Y	Y	Y							

## What are you applying for?

- Motorcycle learner permit
- Motorcycle new licence
- Motorcycle re-issue of licence or learner permit
- Check ride application
- Motorcycle conversion (overseas)
- Variation to a licence or learner permit (e.g. licence type, conditions)

## Your personal details

Title	Surname																		
First given name					Second given name					Third initial (if any)									
Date of birth		D	D	M	M	Y	Y	Y	Y	Gender									
Previous name(s) (inc. maiden name, if not applicable state N/A)																			
Residential address															Postcode				
Postal address (if different from above)															Postcode				
Mobile phone no. (or other if not applicable)										Email									

## Your health details

	Write Yes or No
1. Are you currently suffering from any serious (permanent or long-term) illness, disability, medical condition or injury (or the effects of treatment for any of those things) that may affect your fitness to drive? This includes (but is not limited to) eyesight or hearing problems, conditions that may deteriorate over time (e.g. multiple sclerosis), blackouts/dizziness, epilepsy/seizures, dementia, diabetes, sleep apnoea, head injury, stroke, cardiac conditions/high blood pressure, and mental health conditions.	
2. Has there been any change to a medical condition that you previously notified to VicRoads?	
3. Are you taking any prescribed medicines (excluding antibiotics, contraceptives, inhalers or Hormone Replacement Therapy)?	

*If you answered yes to any of the above, provide information in Additional details section over the page.*

## Your licence/learner permit record

Please answer 'Yes' or 'No' and details as specified

	Write Yes or No
1. Have you ever held a Victorian learner permit or driver licence? <i>If yes, you must specify full name(s) of any licence/permit held*</i>	
2. Have you ever had a driving offence in Victoria?	
3. Are you currently cancelled, suspended or disqualified from driving in Australia or overseas?	
4. Have you previously been cancelled, suspended or disqualified from driving in Australia or overseas (including any other period which you were not permitted to drive)?	
5. Have you ever had a drink driving offence in Australia?	
6. Have you ever had a drug driving offence in Australia?	
7. Are you subject to any Fines Victoria sanctions which prevent you from obtaining a driver licence or learner permit?	
8. Have you ever held interstate, overseas or military learner permits, driver or marine licences? <i>If yes, you must complete the details below for all licence/permit(s).*</i>	

*\*If insufficient room use Additional details section over the page*

Licence or permit number	Date of issue	D	D	M	M	Y	Y	Y	Y	Type
Place of issue (state/country)	Date of expiry	D	D	M	M	Y	Y	Y	Y	Conditions

## Eligibility requirements

Please tick the eligibility criteria you meet in the relevant sections below required for the motorcycle learner permit / check ride / licence you are applying for.

### Section 1 - Motorcycle learner permit

- I am 18 years of age or older
- I am a Victorian resident and have satisfied the evidence of identity requirements

### Section 2 - Check ride activity

- I am 18 years of age or older
- I am a Victorian resident and have satisfied the evidence of identity requirements
- I hold a current Victorian motorcycle learner permit

### Section 3 - Motorcycle licence

- I am 18 years of age or older
- I am a Victorian resident and have satisfied the evidence of identity requirements
- I have held an Australian motorcycle learner permit for a continuous period of at least 3 months (this period has not been broken by any period I was not authorised to ride)
- I have completed a hazard perception test
- I have completed a check ride

### Section 4 - Overseas licence holder applicants

- I am 18 years of age or older
- I am a Victorian resident and have satisfied the evidence of identity requirements
- I hold an overseas full motorcycle licence
- I have provided my overseas motorcycle licence to VicRoads to be recorded on my file

# Motorcycle licence/learner permit or check ride application



## Additional details *(applicant may use this section if applicable)*

## Your signature

The Department of Transport and Planning ABN 69 981 208 782 ('Department') and R&L Services Victoria Pty Ltd ABN 28 657 005 493 (as Trustee for the Victorian R&L Services Trust ABN 96 342 123 072), known as 'VicRoads' and acting on behalf of the Secretary to the Department, ('we, us') collect personal information for registration and licensing purposes. This personal information will be handled by us as permitted or required by the applicable laws. Particularly by the Road Safety Act 1986. This includes the photograph and other information on your driver licence, learner permit or marine licence used for the purposes of biometric matching through the National Driver Licence Facial Recognition Solution for law enforcement, national security and other purposes. It may also include any health information relating to your licence or registration, or sensitive information concerning any relevant criminal history. Your information may be disclosed to third parties including our contractors and agents, law enforcement agencies, other road and traffic authorities, Austroads, the Transport Accident Commission, vehicle manufacturers (for safety recalls), toll road

operators, road safety researchers, courts and other organisations or people authorised to use the information.

Your failure to provide the information may result in this form not being processed, or your records not being properly maintained. For further information about our use of your personal information and your right of access to it, go to: [dtp.vic.gov.au/privacy](http://dtp.vic.gov.au/privacy).

**Providing false or misleading information or documents is an offence under the Road Safety Act 1986 and Marine Safety Act 2010, as applicable, and can result in you being fined or imprisoned. Further, any authority or approval, given as a result of you providing such information/documents, may be reversed and have no effect.**

**By signing this form, I declare that the information in this form and related supporting documents is true, correct and complete, and I understand the privacy statement.**

Signature of applicant	Signature of authorised officer	Date	D	D	M	M	Y	Y	Y	Y
	User ID (VicRoads) or tester no.	Office								

## OFFICE USE ONLY

By signing below I declare that I have completed all details recorded in this OFFICE USE ONLY section.

User ID	Date	D	D	M	M	Y	Y	Y	Y
Signature									

## Theory test

Learner - Motorcycle

Score								
Date passed	D	D	M	M	Y	Y	Y	Y
Signature of authorised officer								
User ID (VicRoads) or tester no.								

## Practical test

auto manual

Motorcycle permit    
 Motorcycle licence

Date passed	D	D	M	M	Y	Y	Y	Y
Signature of authorised officer								
User ID (VicRoads) or tester no.								

## Applicable conditions

E  N  S

## Evidence of identity *(original documents only)*

**Category A evidence**  Australian photo licence  Passport  Other *(specify document type)*

Origin (state/country)	Reference no.	Date of expiry	D	D	M	M	Y	Y	Y	Y
<input type="radio"/> <b>Category B evidence</b>	Document type	Reference no.								
<input type="radio"/> <b>Evidence of residence</b>	Document type									
Signature of authorised officer	Signature of manager <i>(if required)</i>									
Name of authorised officer	Name of manager <i>(if required)</i>									
User ID	Date	D	D	M	M	Y	Y	Y	Y	

## Accreditation

Learner permit/licence receipt (LR)  
 Check ride

Date of issue	D	D	M	M	Y	Y	Y	Y
Name of provider/issuing agency								
Test location								
Tester no. (CC/LR)	Certificate no. (CC/LR)							
Certificate type <i>(permit, CR, licence)</i>								
Certificate expiry date	D	D	M	M	Y	Y	Y	Y

## Motorcycle eyesight test

Yes  No Did the applicant wear corrective lenses during the vision test?  
 Pass  Fail R 6/ L 6/

Date passed	D	D	M	M	Y	Y	Y	Y
Signature of authorised officer								
User ID (VicRoads) or tester no.								

**Learner permit/licence duration**  15 months  3 years  4 years  
 Other period