

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) 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				

What are you applying for?

- New learner permit
- New licence
- Re-issue of licence or learner permit
- Conversion (interstate)
- Variation to a licence or learner permit (eg licence type, conditions, exemptions)

Licence/learner permit type?

- Car
- Motorcycle
- Marine
- Restricted marine (operator between 12-16 years of age)
- Personal watercraft (eg Jetski)
- Light Rigid
- Medium Rigid
- Heavy Rigid
- Heavy Combination
- Multi Combination

You can apply for a replacement (with no change of personal details) at vicroads.vic.gov.au

Your personal details

Title	Surname														
First given name						Second given name									
Date of birth	D	D	M	M	Y	Y	Y	Y	Y	Y	Y	Gender			
Previous name(s) (inc. maiden name, if not applicable state N/A)															
Home address											Postcode				
Postal address (if different from above)											Postcode				
Contact phone number (mobile preferred)							Email (optional)								

Your health details

	Write Yes or No
1. Are you currently suffering from, or have suffered from, any serious or chronic medical condition or disability which could affect your fitness to drive, such as eyesight or hearing problems, blackouts/dizziness, epilepsy/seizures, dementia, diabetes, sleep apnoea, head injury, stroke, high blood pressure, a cardiac, psychiatric or mental condition or a disorder that may deteriorate over time (eg multiple sclerosis)?	
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 details in Additional details section below.

Your licence/learner permit record

	Write Yes or No
1. Have you ever held a Victorian learner permit, driver or marine licence? <i>If yes, you must specify full name(s) of any licence/permit held*</i>	
2. Have you ever registered a vehicle or vessel in Victoria?	
3. Have you ever had a driving offence in Victoria?	
4. Are you currently cancelled, suspended or disqualified from driving in Australia or overseas?	
5. Have you previously been cancelled, suspended or disqualified from driving in Australia?	
6. Have you ever had a drink driving offence in Australia?	
7. Have you ever had a drug driving offence in Australia?	
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). If insufficient room*</i>	

*use Additional details section

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

Additional details (applicant may use this section if applicable)

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Your signature (sign in the presence of an authorised officer)

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 (overleaf).

I declare that I have received a Learner Kit

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

Licence or learner permit application

Victorian residence declaration (use only if unable to provide evidence of residence⁺ - check requirements at vicroads.vic.gov.au)

This declaration can be completed by a referee who has known you (the applicant) for at least 12 months and holds a current Victorian licence. VicRoads may contact the referee to verify information in this application.

By signing this form, I declare that I have known the applicant for at least 12 months, my details and the applicant's address details provided on this application are true and correct and I understand the Privacy statement.

Referee's full name	Referee's Victorian licence no.																			
Signature of referee	Date		D	D	M	M	Y	Y	Y	Y										

Privacy statement

Personal information VicRoads collects from you may be used by VicRoads as permitted by the *Road Safety Act 1986*, and the *Marine Safety Act 2010*. VicRoads may disclose personal information it collects from you to various organisations and persons as permitted by law, particularly by the *Road Safety Act 1986*. This includes disclosing the information to contractors and agents of VicRoads, law enforcement agencies, other road and traffic authorities, the Transport Accident Commission, vehicle manufacturers (for safety recalls), road safety researchers, courts and other organisations or people authorised to use the personal information.

You are required to provide this personal information. Failure to provide the information may result in this form not being processed, or records not being properly maintained. For further information about our use of your personal information and your right of access to it, see VicRoads brochure *Protecting your privacy* or contact VicRoads on 13 11 71.

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

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 - Car/Motorcycle
- Marine
- Personal watercraft
- Bus/Truck

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

Practical test

- Motorcycle permit
- Motorcycle licence
- NHVL auto
- non-synchromesh
- synchromesh

Eyesight test

<input type="radio"/> Car/Motorcycle/Marine/PWC	<input type="radio"/> NHVL	Height (cm)							
<input type="radio"/> Yes	<input type="radio"/> No	Did the applicant wear corrective lenses during the vision test?							
<input type="radio"/> Pass	<input type="radio"/> Fail	R 6/	L 6/						
Date passed	D	D	M	M	Y	Y	Y	Y	
Signature of testing officer									
User ID (VicRoads) or tester no.									

Conditions

- A
- B
- E
- I
- N
- P
- S
- V
- X
- Z

Evidence of identity (original documents only)

Category A evidence	<input type="radio"/> Australian photo licence	<input type="radio"/> Australian birth certificate	<input type="radio"/> Passport	<input type="radio"/> Other (specify document type)						
Origin (state/country)	Reference no.	Date of expiry	D	D	M	M	Y	Y	Y	Y
Category B evidence	Document type	Reference no.								
Evidence of residence⁺	Document type	<input type="radio"/> Victorian residence declaration completed ⁺								
Signature of authorised officer	Signature of manager (if required)									
Name of authorised officer	Name of manager (if required)									
User ID	Date	D	D	M	M	Y	Y	Y	Y	

Accreditation

- Certificate of competence (CC)
- Marine qualification (MQ)
- Learner permit or licence receipt (LR)

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 (MQ)								
Certificate expiry date (MQ, if applicable)	D	D	M	M	Y	Y	Y	Y

Verification of driver licence or learner permit card

Interstate

- Yes No Interstate driver licence/learner permit sighted
- Yes No NEVDIS check performed

Overseas

- Yes No Overseas driver licence/learner permit sighted
- Yes No Driver licence/learner permit translation document sighted
- Yes No Original letter of driver licence/learner permit verification from overseas licensing authority (with original letterhead)
- Yes No Original letter from consulate/embassy supporting authenticity of applicant's driver licence/learner permit

Signature of authorised officer									
Signature of manager (if required)									
User ID	Date	D	D	M	M	Y	Y	Y	Y

- Duration** 6 months 12 months 3 years
 Other period

⁺ not required for a marine licence