## FORM 2

## FORM OF APPLICATION FOR THE GRANT OR RENEWAL OF LEANER'S LICENSE

[See rule 10]

To The	Licensing Authority,		
I her	eby apply for a licence authorising me to di	rive as a learner, the following motor vehicles (s):	
	(a) Motor cycle without gear		
	(b) Motor cycle with gear		
	(c) Invalid carriage		
	(d) Light motor vehicle		
	(e) Medium goods vehicle		
	(f) Medium passenger motor vehicle		
	(h) Heavy goods vehicle		
	(i) Road roller		
	•	tion:	
	PARTICULARS TO	BE FURNISHED BY APPLICANT	
4	Full Name (in Capital latters)		
1.	Full Name (in Capital letters)		
2.	Son/Wife/Daughter of		
3.	Permanent of address		
4	(Proof to be enclosed)		
4.	Temporary/Official address		
_	Official address (if any)	Day Marth Van	
5.	Date of Birth	Day Month Year	
_	(Proof of age to be enclosed		
6.	Education qualification		
7.	Identification mark (s)	1	
		2	
8.	Optional	Blood Group	
		RH Factor	
9.	I hold an effective driving licence to drive		
	(a) Motor cycle/light motor vehicle/medium passenger motor vehicle/medium goods vehicle with		
	effect from		
10.	Particulars of any driving licence previously held by applicant. Whether it was cancelled and if so, for		
	what reason :		

11.	Particulars of any learners licence previously held up applicant in respect of the description of vehicle to which the applicant has applied	
12.	Have you been disqualified for holding or obtaining driving licence or learner's licence if so, for what	
	reasons.	
13.	I enclose 3 copies of my recent photograph [passport size photograph]	
14.	I enclose medical fitness certificate dated issued by (doctor)	
15.	I have submitted along with my earlier application for Learner's Licence/I enclose the written consent of parent/guardian (in the case of applicant being a minor)	
16.	I enclose driving certificate datedissued by	
10.	(Name and address of the driving school)	
17.	I have paid fee of Rs	
18. 19.	I am exempted from the Medical Test rule 6 of Centre Motor Vehicle Rules, 1989.	
Date :		
Place :	Specimen signatures or thumb impression of the applicant	
Specin	nen signatures or thumb impression of the applicant	
1		
2		
	DECLARATION UNDER SUB-SECTION (2) OF SECTION 7 OF THE MV ACT, 1988	
a mino	r is under my care and I accept responsibility for his/her driving. If at a later date I decide not to accept sibility for his/her driving I shall intimate the licensing authority in writing for the cancellation of the licence. I give sent for his/her obtaining learner's licence.	
	Signature	
	Name and full address of the Parent/guardian	
	Relationship	
	(To be signed in the presence of the Licensing Authority or	
	person authorised in this behalf by the Licensing Authority)	

## For Office Use

- \* The applicant is exempted from the medical test under rule 6 and the preliminary text under rule 11 (2) of the Central Motor Vehicle Rules. 1989 Learner's Licence may be issued
- \* The applicant was tested with reference to rule 11 (1) of the Central Motor Vehicle Rules, 1989. He has passed the test. Learner's Licence may be issued.
- He has failed in the test (Reason should be specified).
  Learner's Licence may be refused.
  or other person authorised in this behalf
- \* Strike out whichever is inapplicable.