

HEAVY VEHICLE LICENSING CHECKLIST

Name:			
Address:			
DOB:			
Contact Phone:			
Email			
Current Licence no:		Manual <input type="checkbox"/>	Auto <input type="checkbox"/>
Years current licence held for:			
Knowledge Test	Completed at Service Tas	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Copy must be sent to AJL	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Learner Licence (as per licence class if required)	Copy must be sent to AJL	Yes <input type="checkbox"/>	No <input type="checkbox"/>
USI No. Unique Student Identifier	(Please indicate your USI no. If you don't have one you will need create one www.usi.gov.au)		

ACTUAL DRIVING EXPERIENCE:

What class of licence do you have experience of driving	Tick Gearbox type rating experience			Years of Actual Driving
	Auto <input type="checkbox"/>	Manual <input type="checkbox"/>	Road Ranger – crash box/double clutch <input type="checkbox"/>	
Car	Auto <input type="checkbox"/>	Manual <input type="checkbox"/>		
Light Rigid (LR)	Auto <input type="checkbox"/>	Synchromesh <input type="checkbox"/>		
Medium Rigid (MR)	Auto <input type="checkbox"/>	Synchromesh <input type="checkbox"/>		
Heavy Rigid (HR)	Auto <input type="checkbox"/>	Synchromesh <input type="checkbox"/>	Road Ranger <input type="checkbox"/>	
Heavy Combination (HC)	Auto <input type="checkbox"/>	Synchromesh <input type="checkbox"/>	Road Ranger <input type="checkbox"/>	
Multi Combination (MC)	Auto <input type="checkbox"/>	Synchromesh <input type="checkbox"/>	Road Ranger <input type="checkbox"/>	

What class of licence do you wish to obtain after training	Tick Gearbox type rating required		AJL Truck	Own Truck
	Synchromesh – single clutch <input type="checkbox"/>	Road Ranger – crash box/double clutch <input type="checkbox"/>		
Light Rigid (LR)	Synchromesh <input type="checkbox"/>			
Medium Rigid (MR)	Synchromesh <input type="checkbox"/>			
Heavy Rigid (HR)	Synchromesh <input type="checkbox"/>	Road Ranger <input type="checkbox"/>		
Heavy Combination (HC)	Synchromesh <input type="checkbox"/>	Road Ranger <input type="checkbox"/>		
Multi Combination (MC)	Synchromesh <input type="checkbox"/>			

Details of previous driving experience:	Hours, Where?

Load Restraint Experience:	None <input type="checkbox"/>	Some <input type="checkbox"/>	Substantial <input type="checkbox"/>
Details:			

Comments/Questions/Notes:

AJL ADMINISTRATION PURPOSES ONLY:

Approved:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Training date:			
Advised / how:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Invoice no / paid:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Knowledge Test rcvd:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Truck / Allocated:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Paperwork completed for Trainer:		Yes <input type="checkbox"/>	No <input type="checkbox"/>