

Form 2 Application for The Grant Of Learner's Licence

[See rules 10]

1. [Licensing Authority Details](#)
2. [Application for the learner's licence](#)
3. [Applicant Details](#)
4. [Parent/Guardian Details](#)
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▼ [Licensing Authority Details](#)

Licensing Authority Local Region*

▼ [Application for the learner's licence](#)

The applicant is applying for a licence authorising him/her to drive as a learner, the following motor vehicle(s):-*

Motor Vehicles of the following description, namely :-

▼ [Applicant Details](#)

Name*

Email Id

Mobile No.*

Telephone No

Local Region*

Educational Qualifications*

Place of Birth*

Date of Birth*

Place of Birth is out-side India?*

Name of the Place*

Specify migration Date*

Identification Mark(s)*

Blood Group*

RH (Rhesus) factor

UID

▼ [Parent/Guardian Details](#)

Relationship with the Applicant*

Name*

▼ [Address](#)

Permanent Address:

House/Door No.*

Address Line 1*

Address Line 2

Address Line 3

Pin Code

Duration of Stay at the Present Address*

Temporary Address/Official Address:

(If any)

House/Door No.*

Address Line 1*

Address Line 2

Address Line 3

Pin Code

▼ [Driving History](#)

I hold an effective driving licence to drive Motor-cycle/ Light motor Vehicle/ transport vehicle with effect from

Has the applicant previously held driving licence?*

Provide Details

Whether previous licence was cancelled?

Provide Details

Has the applicant been disqualified for obtaining a licence to drive?*

Provide Details

I have paid the Fee of Rs.*

Particulars of any Learner's Licence previously held by applicant in respect of the description of vehicle to which the applicant has applied

Recent Passport Photograph is enclosed?*

Written consent of Parent/Guardian along with earlier learner's licence application is enclosed?

(In case applicant being minor)

Medical fitness certificate Details:

Issued Date*

Issued Doctor's Name*

Driving Certificate Details:

Issued Date*

Issued Driving School*
(Name and address)

▼ [Declaration](#)

I hereby declare that the information furnished above is true to the best of my knowledge and belief. The required Documents have been enclosed.

I am exempted from the Medical Test under rule 6 of the Central Motor Vehicle Rules, 1989.

I am exempted from the preliminary test under rule 11(2) of the Central Motor Vehicles Rules, 1989.
