

**APPLICATION FOR DEFENSIVE DRIVING COURSE
PUBLIC SUB-AGENCY STATUS IN SOUTH LOUISIANA**

Organization Name _____

Owner: _____

Address: _____

Billing Address: _____

Shipping Address: _____

Telephone: _____

Fax: _____

Email: _____

Web Site: _____

Type of Business: _____

Years in Business: _____ No. Employees: _____

Instructor Experience: _____

1. Describe your current and prospective customer base:

2. Describe other training your company provides:

3. Which NSC Defensive Driving Course(s) are you interested in presenting?
(Check all that apply.)
- Defensive Driving 4/6/8-Hour Courses
 - Defensive Driving Alive at 25 (DDC-A25)
 - Defensive Driving Professional Truck Driver (DDC-PTD)
4. What organizations are you planning to market defensive driving courses to?
- Business
 - Court-referrals (restricted)
 - General public for insurance discount
 - Petrochemical industry
 - Trucking Fleets
 - Other:

5. Name the Louisiana parishes where you would market defensive driving courses?

6. How many students do you plan to teach the defensive driving courses annually?
- ___ 100-200 ___ 200-500 ___ 500-1000 ___ 1000+
7. How many instructors do you plan to certify for defensive driving? ____
8. Ask your insurance agent to send a original liability insurance certificate (listing the Metropolitan Safety Council as a certificate holder) directly to us.
9. Dun & Bradstreet Number: DUNS _____

Note: Upon approval, you will be contacted to register for the Instructor Development Course and purchase the required instructor resource kit. If you have further questions, please contact us at 504-888-7618.

Signature

Date