



Dear ROV DriverCoach Applicant:

The primary responsibility of ROHVA DriverCoaches is to teach the ROV Basic *DriverCourse* – a one-day, hands-on training program. The course provides participants a training experience that includes basic off-highway driving skills, safe driving practices, environmental awareness, and information on protective riding gear.

We suggest that DriverCoach applicants successfully complete the Recreational Off-Highway Vehicle Association (ROHVA) Basic *DriverCourse* (RBDC) prior to attending the DriverCoach Preparation Course. Go to www.ROHVA.org to take the ROV E-Course then find your nearest RBDC location.

- The ROHVA **DriverCoach Preparation (DCP) Workshop** is a 4-day course that teaches individuals all the components of the Basic *DriverCourse*. DriverCoach Candidates will learn evaluation and coaching techniques, presentation methods and communication skills. Please be aware that the DCP is a pass/fail course and DriverCoach Candidates must have prior off-highway motorcycle, ATV, 4WD, or ROV riding/driving experience.
- To become a ROHVA DriverCoach, you must thoroughly and legibly complete the DriverCoach Application and send via e-mail to DCPrep@rohva.org. This must be received **45 days in advance** of the course. The cost for the DCP is \$1,834.00 per person, which includes all instructional material, tuition and the use of a recreational off-highway vehicle, unless specified otherwise. You will be responsible for all travel, meal and lodging expenses.
- Upon enrollment into a DCP, you will receive a confirmation letter, maps and hotel information. Approximately 3 - 4 weeks prior to your DCP, ROHVA will ship your DriverCoach Guide via ground service.
- A **Private DriverCoach Preparation Course** can be arranged to take place at your facility with maximum of six DriverCoach Candidate students and a **sixty** advance notice. A flat rate payment of \$11,000.00 is required at least **thirty** days prior to your scheduled DCP date. You are responsible for providing up to six DriverCoach Candidates for your Private DriverCoach Prep. ROHVA will assist you in finding approved DriverCoach Candidates, but cannot guarantee any additional DriverCoach Candidates. The payment includes all fees to send a DriverCoach Trainer to your location to train your DriverCoach Candidates. A suitable, pre-approved site with enough approved ROVs will be required. All DriverCoach Candidates must be approved by ROHVA. Email DCPrep@rohva.org or call (949) 255-2560 x 3058 for additional information.

Sincerely,

Jeff Zoltek
Sr. Coordinator, DCP
Recreational Off-Highway Vehicle Association



RECREATIONAL
OFF-HIGHWAY
VEHICLE
ASSOCIATION

DriverCoach Application

Complete this ROHVA ROV DriverCoach application to be considered for enrollment in a DriverCoach Preparation Course. Send completed application to Jeff Zoltek at DCPrep@rohva.org

Today's Date: _____

Are you 18 years of age or older? Yes No

PERSONAL INFORMATION	Applicant's Name (first, middle, last)			
	(Mr.) (Ms.) (Mrs.)			
	Work Phone (optional)	Home Phone	Cell Phone	
	() -	() -	() -	
	Email Address			
	Street Address			
	City	State	Zip	
	Shipping Address <input type="checkbox"/> Same As Above (ROV DriverCoach Materials will not be delivered to P.O. Boxes)			
	Street Address			
	City	State	Zip	

CURRENT EMPLOYMENT	Are you legally entitled or authorized to work in the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No																											
	Current Employer																											
	Date Started	Job Title																										
	Street Address																											
	City	State	Zip	Work Phone																								
				() -																								
	Supervisor	May we contact?		<input type="checkbox"/> Yes <input type="checkbox"/> No																								
	<input type="checkbox"/> From the list below, please write one letter in the box that best describes your current employment:																											
	<table border="0"> <tr> <td>P- Private Business</td> <td><u>MILITARY</u></td> <td><u>AGENCY (FEDERAL/STATE)</u></td> <td>J- Public Utilities</td> </tr> <tr> <td>D- Dealership</td> <td>F- Air Force</td> <td>U- US Forest Service</td> <td>L- Law Enforcement</td> </tr> <tr> <td>R- Retired</td> <td>A- Army</td> <td>H- Soil Conservation Service</td> <td>X- Other Agency</td> </tr> <tr> <td>G- Not Employed</td> <td>C- Coast Guard</td> <td>B- Bureau of Land Management</td> <td></td> </tr> <tr> <td>O- Other _____</td> <td>N- Navy</td> <td>E- Army Corp of Engineers</td> <td></td> </tr> <tr> <td></td> <td>M- Marine</td> <td>S- State Resource Agency</td> <td></td> </tr> </table>				P - Private Business	<u>MILITARY</u>	<u>AGENCY (FEDERAL/STATE)</u>	J - Public Utilities	D - Dealership	F - Air Force	U - US Forest Service	L - Law Enforcement	R - Retired	A - Army	H - Soil Conservation Service	X - Other Agency	G - Not Employed	C - Coast Guard	B - Bureau of Land Management		O - Other _____	N - Navy	E - Army Corp of Engineers			M - Marine	S - State Resource Agency	
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Military Status: <input type="checkbox"/> Active <input type="checkbox"/> Reserve <input type="checkbox"/> Retired <input type="checkbox"/> None		Rank: _____																										
Base/Installation: _____																												

PREVIOUS EMPLOYMENT	Please list other occupations and employers for the past five years (If necessary, please attach additional sheets of paper)		
	Employer Name		
	Supervisor Name and Phone	Date of Employment (to - from)	Reason for leaving
	Employer Name		
	Supervisor Name and Phone	Date of Employment (to - from)	Reason for leaving
	Employer Name		
	Supervisor Name and Phone	Date of Employment (to - from)	Reason for leaving
	Have you ever been employed by the ATV Safety Institute, the Specialty Vehicle Institute of America, the Motorcycle Safety Foundation, the Motorcycle Industry Council or the or Recreational Off-Highway Vehicle Association? <input type="checkbox"/> Yes <input type="checkbox"/> No Date(s) _____ - _____		
Military Status: <input type="checkbox"/> Active <input type="checkbox"/> Reserve <input type="checkbox"/> Retired <input type="checkbox"/> None Branch of Service: _____ Base: _____			

EDUCATION	Formal Education (begin with most previous)				
	Institution/City/State	# Years Attended	Graduated	Degree	Major Subjects
			<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		
			<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		
			<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>		
	Other Specialized Training Received: _____				
	Do you speak a foreign language? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which: _____				

OFF-ROAD DRIVING/RIDING EXPERIENCE	What type of powersports products do you own? <input type="checkbox"/> ROV/UTV/Side-by-Side <input type="checkbox"/> ATV <input type="checkbox"/> Off-road motorcycle <input type="checkbox"/> Street Motorcycle <input type="checkbox"/> Personal Watercraft <input type="checkbox"/> Snowmobile <input type="checkbox"/> Other _____	
	Have you taken the <i>DirtBike School</i> or <i>ATV RiderCourse</i>? <i>DirtBike School</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>ATV RiderCourse</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, date(s) and location(s):
	Please list amount of off-road riding/driving experience in the following: <i>ROV/UTV/Side-by-Side</i> _____ years <i>4WD Sport/Utility Vehicle</i> _____ years <i>ATV</i> _____ years <i>Off-Road Motorcycle</i> _____ years	Explain your off-road riding experience in more detail (required): _____ _____ _____ _____
	What are your goals as a ROV <i>DriverCoach</i>? _____ _____ _____ _____	
	Current club membership(s). Please list any ROV/ATV/Motorcycle/PWC/Snowmobile/4WD clubs to which you belong. _____ _____	

OTHER	Have you ever had a license to operate a motor vehicle revoked or suspended for any reason?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Have you ever plead guilty or 'no contest', or been convicted of a misdemeanor or felony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	If yes to either of the above, please state the facts and dates fully: _____		
	Are you able to satisfactorily perform the essential functions of a ROHVA <i>DriverCoach</i> , either with or without reasonable accommodation? (please ask if you are uncertain as to the essential functions) <input type="checkbox"/> Yes <input type="checkbox"/> No		

PERSONAL REFERENCES	List at least three people who have known you for at least two years whom we may contact (non-family members preferred).			
	Name	Relationship	Phone	Address

BDC PROVIDER INFORMATION	Which ROHVA Sponsor will you be teaching for?	
	ROHVA DriverCoaches are independent entities certified by ROHVA to offer the RBDC to their agency personnel, employees, or the public. DriverCoaches are responsible for collecting the student tuition fees and are invoiced by ROHVA.	
	<input type="checkbox"/> The Public	
	<input type="checkbox"/> I will be working for the Military or another public agency	Military Base/Agency Name:
Contact Name / Address / Phone:		
<input type="checkbox"/> Both		

ACKNOWLEDGEMENTS

This application does not guarantee a position in a ROHVA DriverCoach Preparation Course nor does it guarantee that ROHVA will issue the applicant a DriverCoach Certification. If the applicant is offered a position in a ROHVA DriverCoach Preparation Course and the applicant successfully completes the course, ROHVA may issue a ROHVA DriverCoach Certification to the applicant. A ROHVA DriverCoach Certification will only be issued upon execution of a ROHVA DriverCoach Certification Agreement between the applicant and the ROHVA. This application shall become an integral part of any ROHVA DriverCoach Certification Agreement that may be executed between the applicant and the ROHVA. Unless and until ROHVA issues a ROHVA DriverCoach Certification to the applicant, the applicant is not an authorized, certified ROHVA DriverCoach and may not make any representations or perform any acts as such.

I further understand that the ROHVA may contact my current and/or previous employers, schools attended and personal references. I authorize such employers, schools and personal references to disclose to the ROHVA all records and information pertinent to my employment and/or affiliation with them. I hereby waive fully any rights or claims I may have against my current and/or former employers, schools attended and personal references, as well as their agents, employees and representatives, and release them from any and all liability, claims or damages that may result, directly or indirectly, from the use, disclosure or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I certify that I have read this Application for Certification and Enrollment in a ROHVA DriverCoach Preparation Course in its entirety, and that the information contained herein is true and correct and that I have not omitted any relevant information. I understand and agree that falsification of any information provided herein, or the omission of any relevant information, will result in immediate revocation of my ROHVA DriverCoach Certification and/or termination of employment.

Signature _____ Date _____