Download this PDF, then complete it using Acrobat Reader.

Class 1 Mandatory Entry-Level Training (MELT) Instructor Training Records

Driver Training Instructor and School Information

DRIVER'S LICENCE NUMBER	SURNAME	GIVEN NAMES	DRIVER TRAINING SCHOOL NAME	DTC NUMBER

Instructor Training Records

Student DL#	Student Name (Surname, Given Names)	Date of Training (YYMMMDD)	Start Time* (HHMM)	End Time* (HHMM)	Training Type*	Module/Subject Taught	Instructor Initials

* **Note:** Start and end times must be in 24-hour clock format. Training Type: **THY** – Theory, **INY** – In-Yard, **OFF** – Off-Road, **ON** – On Road.

Class 1 Mandatory Entry-Level Training (MELT)
Instructor Training Records

Driver Training Instructor and School Information

DRIVER'S LICENCE NUMBER	SURNAME	GIVEN NAMES	DRIVER TRAINING SCHOOL NAME	DTC NUMBER
12345678	O'BRIEN	CONAN CHRISTOPER	BCB Driving School	0911

Instructor Training Records

Student DL#	Student Name (Surname, Given Names)	Date of Training (YYMMMDD)	Start Time* (HHMM)	End Time* (HHMM)	Training Type*	Module/Subject Taught	Instructor Initials
0 1 2 3 4 5 6 7	VIVINO, JIMMY	2 4 J U N 0 1	0 8 0 0	1 1 3 0	THY	Vehicle Components & Systems	
0 2 3 4 5 6 7 8	RICHTER, JIMMY	2 4 J U N 0 1	0 8 0 0	1 1 3 0	THY	Vehicle Components & Systems	

SAMPLE

* **Note:** Start and end times must be in 24-hour clock format. Training Type: **THY** – Theory, **INY** – In-Yard, **OFF** – Off-Road, **ON** – On Road.