



**FAIRLEIGH DICKINSON UNIVERSITY  
MOTORCYCLE SAFETY EDUCATION PROGRAM**

1000 River Road, H-DH1-02  
Teaneck, NJ 07666  
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**RiderCoach Application 2009**

Please print or type and mail, email *or* fax to FDU.

**1. Personal Information:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_ Cell: \_\_\_\_\_  
Driver License #: \_\_\_\_\_ State: \_\_\_\_\_  
Has it ever been suspended, if so, why? \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Cell: \_\_\_\_\_

**2. Experience:**

Occupation: \_\_\_\_\_  
Current Employer: \_\_\_\_\_  
City State: \_\_\_\_\_  
Previous Employer: \_\_\_\_\_  
City State: \_\_\_\_\_  
High School Graduate or GED      Yes       No   
College/University Graduate?      Yes       No       Masters/PhD? Yes  No   
Degree/Certifications Received: \_\_\_\_\_  
Fluency in foreign languages?      Yes       No       Which? \_\_\_\_\_  
First Aid Certification?      Yes       No       Expiration date: \_\_\_\_\_  
CPR Certification?      Yes       No       Expiration date: \_\_\_\_\_

Give a brief description of any teaching/training experiences (on the job, volunteering, etc):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list three names, phone numbers and affiliations for references (business and motorcycle related):


**3. Motorcycling Experience:**

How many years have you been riding? \_\_\_\_\_

How long have you had a motorcycle endorsement on your driver's license? \_\_\_\_\_

(must be current- OK if out-of-state, and for a minimum of two years, NJ MVC conditions apply)

Do you currently own and operate a street legal motorcycle? Yes  No

What types/Year: \_\_\_\_\_

Miles ridden last year: \_\_\_\_\_

Previous bikes? \_\_\_\_\_

Please rate in order of frequency, what type of riding do you:

Touring: \_\_\_\_\_ Off Road: \_\_\_\_\_

Commuting: \_\_\_\_\_ Clubs/which one: \_\_\_\_\_

Sport: \_\_\_\_\_

Competitive: \_\_\_\_\_

Have you completed a Motorcycle Safety Foundation Course? Yes  No

Please list years taken: RSS//BRC: \_\_\_\_\_ ABRC/IRC: \_\_\_\_\_ ERC: \_\_\_\_\_

Have you ever taught an MSF Course? Yes  No

If yes, list where & when: \_\_\_\_\_

Any other motorcycle schools/classes? Yes  No

If yes, list where & when: \_\_\_\_\_

**4. Availability & Ability:**

Describe in detail, why do you wish to become an MSF RiderCoach? (Use separate sheet as needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Should you become an FDU RiderCoach, how often would you be able to teach courses at FDU?

Weekends per year: \_\_\_\_\_

Weekdays per year: \_\_\_\_\_

Note: Minimum teaching requirements (8x/yr) and attendance at RiderCoach updates required.

This is an extremely physically and mentally demanding course. Do you have any physical or medical conditions, which may affect your performance in this course? Yes  No

If yes, please give a detailed description (or contact Director of RiderCoach Development to discuss how we may best accommodate your needs):

\_\_\_\_\_  
\_\_\_\_\_

**Signature:**

**Date:**

Revised: December 27, 2008