

LICENCE UPGRADE FORM

ENSURE YOU ADVISE THE CLERK OF THE COURSE YOU REQUIRE OBSERVATION

Name: _____ Licence # _____

C1 to C2 C2 to Int C R1 to R2 R2 to Int R M to C1 (Junior) Junior Application

Race Applications (C / Int C) - Schedule L- Article 4.3 & 4.5

Minimum of eight (8) raced
Minimum of two (2) different Circuits* (C2 to Int C)
Or Licensed Driving School Clearance and one (1) race clearance

Rally Applications (R / Int R) - Schedule L- Article 4.3 & 4.5

Minimum of two (2) National permitted events
Minimum of two (2) different Venues* (R2 to Int R)
Or Licensed Driving School Clearance

Junior Race (C Grade)- Schedule L- Article 3.2 (3)

Minimum of five (5) ClubSport permitted events
Or Licensed Driving School Clearance

Junior Rally (R Grade)- Schedule L- Article 3.2 (4)- Clubman's

Minimum of three (3) ClubSport Advanced permitted events
Or Licensed Driving School Clearance

Or Complete L002F- Licence Exemption Form (Clearances are individual races completed not individual meetings attended)

Event Clearance 1			
Event/Club:			
Date:		Venue:	
CotC Name:		CotC Signature:	
Race/Run 1	Race/Run 2	Race/Run 3	Or RALLY
Please mark with a tick (satisfactory) or cross (if issues). If Crossed please enter decision number:			
Event Clearance 2			
Event/Club:			
Date:		Venue:	
CotC Name:		CotC Signature:	
Race/Run 1	Race/Run 2	Race/Run 3	Or RALLY
Please mark with a tick (satisfactory) or cross (if issues). If Crossed please enter decision number:			
Event Clearance 3			
Event/Club:			
Date:		Date:	
CotC Name:		CotC Signature:	
Race/Run 1	Race/Run 2	Race/Run 3	Or RALLY
Please mark with a tick (satisfactory) or cross (if issues). If Crossed please enter decision number:			
Event Clearance 4			
Event/Club:			
Date:		Venue:	
CotC Name:		CotC Signature:	
Race/Run 1	Race/Run 2	Race/Run 3	Or RALLY
Please mark with a tick (satisfactory) or cross (if issues). If Crossed please enter decision number:			
Event Clearance 5			
Event/Club:			
Date:		Venue:	
CotC Name:		CotC Signature:	
Race/Run 1	Race/Run 2	Race/Run 3	Or RALLY
Please mark with a tick (satisfactory) or cross (if issues). If Crossed please enter decision number:			
Driving School Clearance			
Driving School and Instructor:			
Date:		Signature:	