

Michigan Driver Education Associates – MI-DEA

Professional Development Registration Form

Email Correspondence Courses – (Email required) \$40

[Approved by MDOS]

As you know, every driver education instructor in Michigan is required to complete an approved professional development offering every two years during the 2-year cycle that corresponds with their instructor license renewal period. You can complete your professional development requirements from the comfort of home, and at your own speed and pace.

To register for one of courses:

1. Pick your course from the list below. Complete the form and scan/email the form to midriveredassociates@gmail.com.
2. Once we receive your registration form and payment, the “lead instructor” of the course you have selected will send you the course reading material, a test/assessment, and evaluation form for you to complete and return. You have two years from the date of registration to complete the course.
3. Upon successful completion, the lead instructor will review your homework and notify the MI-DEA office. The MI-DEA office will e-mail you a receipt (for tax purposes) and certificate of completion. Please keep the certificate of completion in a safe place for a period of four (4) years. You will need this certificate when you renew your instructor license with the Michigan Department of State.

Name:	Instructor License No.:
Email:	
Mailing address:	
Instructor license expiration:	Phone:

Please choose from one of the following courses by placing an “X” in the box.

	(Updated in 2022) “Technology Systems That Keep U.S. Safe” (Includes a free student resources document with links to vehicle technology videos that can be shown in your classroom)	
	“New Technology: Driving into the Future”	
	“Tips for Behind-the-Wheel”	
	“Michigan Bicycle and Pedestrian Laws” – Driver Education Curriculum	
	“Teaching 101: Classroom Tips for Non-Teacher Certified Driver Education Instructors” (Certified teachers may also take this course for credit as a refresher.)	
Payment Method:	Card no. _____	Name on card: _____
<input type="checkbox"/> VISA	Expiration (mo/yr) _____	Signature: _____
<input type="checkbox"/> Mastercard	CVV security number _____	_____
	Amount authorized: _____	