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## HRNSW LICENCE UPGRADE APPLICATION B GRADE DRIVER TO A GRADE DRIVER

Please note that this Licence Upgrade Application is to be completed in full and returned to Harness Racing NSW for processing. Forms received that are either incomplete or incorrectly filled in will be returned to the applicant unprocessed.

LICENCE UPGRADE APPLICATION CHECKLIST												
Mark boxes	with either a $\checkmark$ or $X$ as app	ropriate:										
	I have attained the age of seventeen (17) years;											
	I have completed two hundred (200) competitive drives.											
	I have not incurred three (3) or more suspensions for driving related matters in the past two hundred (200) drives;											
	I have not incurred twelve (12) or more infringements for driving related matters in the past two hundred (200) drives;											
	I have undertaken a HRNSW Medical Assessment during the last six (6) calendar months (see note below);											
	I have undertaken a Cognitive Test and have enrolled in or completed the HRNSW Education & Welfare Program (if required to do so);											
	I have driven fifteen (15) winners and have been licenced as a B Grade Driver for a minimum of eighteen (18) consecutive months;											
I have driven fifty (50) winners and have been licenced as a B Grade Driver for less than eighteen (18) consecutive months;												
If you have not undertaken a HRNSW Medical Assessment during the last six months you may be required to do so as part of the overall licence upgrade process.												
Note that all Licence Upgrade Applications submitted are subject to review by the Harness Racing NSW Licencing Committee which may necessitate further information and/or undertakings on your part prior to a Licence Upgrade Application being considered or approved.												
HRNSW Lice	rmation regarding the docu encing Policy (available at wo to receipt and processing of	ww.hrnsw.co	om.au or by contact	ing Harn								
	between 2 – 6 weeks for the received during the annual											
APPLICANT INFORMATION												
Title	Surname					Given Nar	nes					
Residential Address					<u> </u>						Post Code	
Postal Address (if different from residential)											Post Code	
Home Phone			Work Phone					Fax Number				
Mobile Nu	mber		Date of Birth			PI.	Place of Birth					
email addr	ress											
Signature of Applicant					Date				Licence Number			