



Driver's License, Learner's Permit or ID Card Application

(Passenger (Class D), Motorcycle (Class M), Class D/M, or Massachusetts Identification Card)

Save time, go to mass.gov/RMV to apply online!

A. Service Type							
1. Type: REAL ID Standard ID							
2. Document to Issue: Learner's Permit	Driver's License	chusetts ID	Card				
3. Class of Learner's Permit/License (if applicable	e): Passenger (Class D)) Motor	rcycle (Class M) Both	(Class D/M)		
Service Type: ☐ New ☐ Renewal ☐ Repla ☐ Change of Information (Enter new information)						Eye Color	
B. Applicant Information							
Last Name (If you're getting a REAL ID, provide y	your full legal name) First Name		_	Middle	Suffix		
Current Massachusetts Learner's Permit or Drive	r's License # (if applicable)	if applicable)		(MM/DD/Y)	YYY)		
What is your Social Security Number?	If you do not have a Social Security Number, you will need an SSA Denial notice & Foreign Passpo					& Foreign Passport.	
Decidential Address (Allhors you petrolly reside)	Foreign Passport #						
Residential Address (Where you actually reside)	214			21-1-	7'- 0-4		
Street Ap Mailing Address ☐ (same as above)	ot. # City			State	Zip Code)	
	ot. # City			State	Zip Code	j	
Email	7		Phone Type		Phone #	•	
			☐ Cell ☐	Home 🔲 V	Vork		
Emergency Contact Information: (optional)			T		15, "		
Email Na	ame		Phone Type	Home 🔲	Phone #		
C. Out of State Conversion (Ski	p if not converting from out o	of state)					
Driver's License, Learner's Permit or ID Card # Document Type Restriction(s) (if appl					n(s) (if applicable	2)	
	☐ Learner's Permit ☐ Driver's License ☐ ID Card						
Country	State	Issue Date (MM/DD/YYYY) Expiration Date (MM/DD/YYYY			(MM/DD/YYYY)		
D. Required Demographic Info	ormation						
						Height (feet, inches)	
Register me (or keep me registered) as an Organ	and Tissue Donor: Yes	s □ No F	or more inform	ation on orga	an and tissue don	ation, visit: <u>NEDS.org</u> .	
Would you like to donate \$2 to the Organ and Tis (to be answered for renewal and replacement train		d?				☐ Yes ☐ No	
Military Status (documentation is required if che	cked – visit mass.gov/rmv fo	r acceptabl	le documents)				
☐ Are you an active duty member? What military branch?			☐ If you are a veteran of the U.S. Armed Forces, do you want the word "VETERAN" printed on your ID?				
E. CDL Downgrade (if applicable)		Г					
CDL Downgrade: I understand that my CDL will be downgraded to a Class D, M, or D/M license and I authorize the RMV to process this transaction.							
Applicant Signature:				9011	-WALK-IN	1	

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F. Voter Registration
We will use your information to update your voter registration or register you to vote.
1. Are you a citizen of the United States?
To register to vote, you must be: A U.S. citizen, and A Massachusetts resident, and At least 16 years old, and Not under guardianship that prohibits registering to vote, and Not temporarily or permanently disqualified by law from voting, and Not currently incarcerated for a felony conviction.
If you cannot answer "Yes" to all the items above, or do not want us to share your information for voter registration, check the box below.
Do not use my information for voter registration.
Your decision not to register to vote is confidential. If you register to vote, the office at which you submit your registration is confidential and will only be used for voter registration purposes.
If you are under age 16, you will not be registered to vote. If you are at least age 16, you will be pre-registered to vote. You must be at least 18 to vote.
AFFIRMATION FOR APPLICANTS REGISTERING TO VOTE (signed under the penalty of perjury) I hereby swear (affirm) that I meet the qualifications listed above and that I consider the residential address on this form to be my home. Penalty for illegal voter registration: Fine of not more than \$10,000 or imprisonment for not more than five years or both (M.G.L., Chap. 56, Section 8).
G. Mandatory Questions
1. In the past 10 years, have you held any class of license, in any other state, country or jurisdiction?
If yes, where? (Country/State) What credential class? What credential #?
List any current license/permit also:
2. Do you have a cognitive, neurologic, physical or any other impairment that may affect
3. Are you currently taking any medication that may affect your ability to safely operate a motor vehicle?
4. Is your license or RIGHT to operate suspended, revoked, canceled, withdrawn, or disqualified here or
H. Parent/Guardian Consent for Applicants under the age of 18 (Information & Certification of Person Providing Consent)
If the person giving consent IS NOT a parent, proper documentation of authority must be shown. I hereby certify I am: (check one)
of the above-named applicant who is less than 18 years of age, but not less than 16 years of age, if applying for a Learner's Permit or Driver's License OR who is less than 18 years of age, but not less than 14 years of age, if applying for an ID card, and that my consent is given as required by M.G.L. Chap. 90, Section 8 for the issuance of a Driver's License; or as required by M.G.L. Chap. 90, Section 8B for a Learner's Permit; or by M.G.L. Chap. 90, Section 8E for an Identification Card (ID). False certification is punishable by fine, imprisonment, or both (M.G.L. Chap. 90, Section 24B).
Parent/Guardian's Address:
Parent/Guardian's Signature:
I. Certification and Signature of Applicant (application not complete without signature)
I have reviewed this completed Application Form , including the Voter Registration Section , and hereby apply for a Learner's Permit/Driver's License or an ID card and swear (affirm), under the penalties of perjury, that the information I have provided is true and correct.
I am aware that false statements are punishable by fine, imprisonment, or both under M.G.L. Chapter 90, Section 24B.
Signature: Date:
The Registrar reserves the right to cancel, revoke, or recall, any learner's permit, driver's license, or ID card if it is determined that the applicant was not qualified for such learner's permit, driver's license, or ID card.
Official Notice:

Massachusetts law requires persons convicted as a sex offender to register with their local police departments. For information, call 1-800-93MEGAN or visit https://www.mass.gov/orgs/sex-offender-registry-board



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