Miami-Dade Aviation Department
Airside Operations Division
P.O. Box 025504
Miami, Florida 33102
(305) 876-7359
AOADT@flymia.com

MOVEMENT AREA DRIVER TRAINING APPLICATION

Training Location: North Terminal, Concourse D, Third Floor Skyride, across from the Dolphin Garage Parking Area

Class by appointment only, 24 hours advance notice is required. Please email the completed application to AOADT@flymia.com

CLASS DATE: _____ **Time:** 9:00 AM
Exact Date (mm/dd/yy)

CLASS SCHEDULE: SECOND AND FOURTH WEDNESDAY OF THE MONTH AT 0900 AM

FIRST NAME:	MIDDLE NAME:	LAST NAME:	LAST 4 OF SOCIAL: **XXX-XX-**
COMPANY NAME:	JOB TITLE:	AIRPORT BADGE NUMBER:	AIRPORT BADGE EXPIRATION:
DRIVER LICENSE NUMBER:	STATE ISSUED:	DRIVER LICENSE EXPIRATION:	DATE OF BIRTH:
HOME ADDRESS:	CITY / STATE / ZIP CODE:	CONTACT PHONE NUMBER:	EMAIL:

REQUIREMENTS:

1) $15.00 Fee - Credit / Debit Card, Company Check, or Money Order - **NO CASH and NO PERSONAL CHECKS**
   - Government Agencies - **No Charge.** - Tenants with Billing Accounts will be Billed.
2) Valid State Driver's License.
3) Possess a current AOA Non-Movement Area or AOA Movement Area Driver's Training Permit.
   - State Driver's License and AOA Driver's permit must be must be on person at all time while operating a motor vehicle.
4) All attendees must bring to class this original application (not a copy) signed in blue ink by the Authorized Signer.
5) Attendees must be Fluent in English (Read, Speak and Write English easily and accurately).
6) Please arrive 45 minutes prior to class time for check-in.

In the section below, please write the job duties that require you to obtain the AOA Movement Area Driver's Training Permit.

I acknowledge that I must receive recurrent Movement Area Driver Training every 12 consecutive calendar months or return this permit to the Miami Dade Aviation Department (MDAD). I acknowledge that I will return the Movement Area Drivers Permit if it is no longer a requirement of my job to operate in the movement area. Failure to return your Movement Area Training Permit will result in my MDAD SIDA ID Badge deactivated until the earlier mentioned requirements are met. I acknowledge that any driving violations as stipulated in the Code of Miami-Dade County, Aviation Department Rules and Regulations Chapter 25 may result in a CIVIL VIOLATION NOTICE (CVN) or a SAFETY VIOLATION NOTICE (SVN) being issued, which may result in a monetary fine being assessed to me personally.

_____ _____
Employee Signature Date

I am authorizing the above employee to attend the AOA Movement Area Driver Training class. I affirm that the above employee seeking certification has the proper justification to operate a motor vehicle on the Non-Movement and Movement Area at Miami International Airport and by stating such acknowledge that my company accepts liability for any and all damages / injuries that may result from operating a motor vehicle on the AOA at Miami International Airport.

Authorized Signatory (Name and Title)	Signature	Date
MANAGER OR ABOVE		

TRAINING LOCATION: North Terminal, Concourse D. Third Floor skyride, across from the Dolphin Parking Area.