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| **Drivers Education Record Card**  High School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Parent/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parents Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Learner Permit #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Eligibility Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (6 Months after you get your learners AND not before your 16th birthday)    **Parental Consent:**  **I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give permission for my student,**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to drive in the Driver’s Education car**  **with a certified driving instructor from Emery High.**  **Parent signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **---------------------------------------------------------------------------------------**  **To Be Completed By Instructor**  Classroom Completion Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Payment: \_\_\_\_\_\_\_\_\_\_\_   |  |  |  |  | | --- | --- | --- | --- | | **Drill/Skill** | **Date** | **BTW** | **Obs.** | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | |  |  |  |  | | **Totals** | |  |  | | **Is DEMS Updated** | | **Yes** | **No** |   Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Instructor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Driving Checklist**   1. **Are enrolled in or have you completed a DRED Class? Yes No** 2. **Is your Learners Permit current? Yes No** 3. **Have you paid your Driving fee to EHS? Yes No** 4. **Do you have 40 hrs. driving with a parent/guardian? Yes No** 5. **Are you 16? Yes NO**   **If no, list the date you turn 16. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Driving Sessions**  Session 1- Right & Left turns, Lane Changes, Backing  Session 2- Two & Three Point Turns- Review  Session 3- Parking- 90 & 45 Degree, Parallel , Hill- Review  Session 4- U-Turns; Two Lane Road, Multi-Lane Road-Review  Session 5- SAFE Method- Scan, Assess, Find, Execute-Review  Session 6- Review, Test Preparation  **Skills to be Emphasized**  Speed Limit Following Distance  Lane Travel Observation/Alertness  Observation Lane Position  Checking Blind Spot Signaling  Acceleration/Braking Steering  Stopping SAFE Method  Traffic Check (L,R,L,R) |
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