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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: \_\_\_\_\_\_\_\_\_\_\_

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| **Drill/Skill** | **Date** | **BTW** | **Obs.** |
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| **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, BackingSession 2- Two & Three Point Turns- ReviewSession 3- Parking- 90 & 45 Degree, Parallel , Hill- ReviewSession 4- U-Turns; Two Lane Road, Multi-Lane Road-ReviewSession 5- SAFE Method- Scan, Assess, Find, Execute-ReviewSession 6- Review, Test Preparation**Skills to be Emphasized**Speed Limit Following DistanceLane Travel Observation/AlertnessObservation Lane PositionChecking Blind Spot SignalingAcceleration/Braking SteeringStopping SAFE Method Traffic Check (L,R,L,R) |
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