

# FARMINGTON HIGH SUMMER DRIVERS EDUCATION 2019

1. We must have at least 30 students registered in each section to run this program.
2. The cost is \$140.00 and is due when you register for the class.
3. This class will run 9 consecutive weekdays, 3 hours a day, in order to meet the 27 hours required by Utah State Law. Students **MUST** attend all 9 days. There **WILL NOT** be any makeup days. June Classes will start promptly at 7:30 AM and 11:00 AM. August Class will start promptly at 7:30 AM. The classroom is located in Room #1602 \*\*Students will also have to drive with a road instructor for 6 hours **IN ADDITION** to the 27 hours of classroom time.
4. Registration will be at Farmington High School beginning Monday April 8, 2019 until classes are full, the office hours are 7:00 AM to 3:00 PM school days. Applications are taken on a first come, first served basis (**FARMINGTON HS BOUNDARY STUDENTS HAVE PRIORITY**) and late registrations will only be considered if there is room in a class. NO late registrations will be accepted after the class start date.
5. Students must be 16 years of age on or before December 31, 2019 to take Summer Drivers Education. (**FARMINGTON HS BOUNDARY STUDENTS HAVE PRIORITY**)
6. **YOU MUST** take the state hand book test from the Driver License Division and have your learner permit **BEFORE** you register for summer driver's education.

1. Section 1 Monday, June 4 – Thursday, June 14 7:30 AM – 10:30 AM
2. Section 2 Monday, June 4 – Thursday, June 14 11:00 AM – 2:00 PM
3. Section 3 Monday, August 5-Thursday, August 15 7:30 AM – 10:30 AM

7. You will receive your first choice unless that section is already full or unless there are not enough registered students to hold that section. WE WILL ONLY NOTIFY YOU IF THERE IS A PROBLEM WITH YOUR FIRST CHOICE. (**FARMINGTON HS BOUNDARY STUDENTS HAVE PRIORITY**)

PLEASE KEEP THE TOP PORTION OF THIS FORM FOR INFORMATION REGARDING THE CLASSES

## Farmington High School Summer Driver's Education Registration Form

NAME \_\_\_\_\_ (First, Middle Last as appears on Birth certificate)

Learner Permit # (**REQUIRED**) \_\_\_\_\_ Student Number: \_\_\_\_\_

Birth Date (mo, Day, Yr) \_\_\_\_\_ School Attending Next Fall \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_

Section 1st Choice \_\_\_\_\_ Section 2nd Choice \_\_\_\_\_ Section 3<sup>rd</sup> Choice \_\_\_\_\_

Amount Received \$140.00 \_\_\_\_\_ **Attach copy of Receipt** \_\_\_\_\_