



Driver Education Program Behind-the-Wheel Contract

St. Francis Area Schools Community Education

The following includes important information about Behind-the-Wheel driving. This program is facilitated by St. Francis Area Schools Adult Community Education located in St. Francis High School. Please direct all questions to this office at 763-213-1640 (not the high school office).

COST: \$280—A blue card is issued at this time.

PERMIT INFORMATION: Students must have their **BLUE CARD**, original **BIRTH CERTIFICATE** and Social Security number with them to take their instruction permit test. Plus include one of the following:

- Certified secondary or post-secondary school transcript
- United States non-metal Social Security card (if you do not take your Social Security card, you will still need the number.)
- Current secondary school student identification card with student's name, a photograph, and date of birth or unique identification number

Many SFHS students test at the Anoka Exam Office located at 2830 Cutters Grove Avenue, Suite 108 in Anoka. Business hours are 8:00 a.m. to 4:00 p.m., Monday through Friday. Effective July 13, 2020 students are required to schedule their knowledge (permit) exam online at <http://drive.mn.gov>. The DMV no longer allows testing without appointments. **After passing the permit exam (given between the hours of 8:00 a.m. and 3:45 p.m.), it is the responsibility of the student to bring their permit to the Community Education office. Behind-the-Wheel hours will not be scheduled until proof of permit is shown.** Permit may also be emailed to nancy.messerschmidt@isd15.org.

SCHEDULING: The state of Minnesota requires six hours of actual driving time with an instructor before taking the driver's license test. Students drive for one hour each scheduled appointment and observe other student drivers for one to two hours. A scheduled appointment is normally up to three hours. Students are picked up and dropped off at the main entrance of the high school. Student must have their instructional permit with them at every Behind-the-Wheel appointment.

REFUNDS: No refunds for the course will be given after six months and a \$50 handling fee will be retained. A receipt is needed for refund. As per Minnesota state law, any student who has their instructional permit and requests a refund within the six months must provide proof that he/she are enrolled in a certified behind the wheel program before a refund can be processed.

CANCELLATIONS: Cancellation of a scheduled appointment must be received **no later than 7:30 a.m.** the day of the appointment. Cancellations may be made by calling the Adult Community Education office at **763-213-1640**. Failure to cancel a scheduled appointment results in a **no show**. The student will be removed from the schedule until a fee of \$50 is paid.

MISCELLANEOUS INFORMATION: Occasionally, upon recommendation of the instructor, a student may need additional driving time over the minimum six hours required. If additional time is needed, a fee of \$50 per hour will be charged.

Students will be issued a white card upon completion of Behind-the-Wheel. This card is needed when taking the driver's license exam. Students must have their permit 6 months and be 16 years of age before taking the driver's exam. Driver's exams (not permit testing) may be scheduled by calling 651-284-1000:

Make sure you allow plenty of time when scheduling the driver's road test.

Call Adult Community Education at 763-213-1640 for more information.

DO NOT CUT

Student Name _____ Date of Birth _____
First Middle Last

Address _____ City _____ Zip _____

Primary Phone _____ Parent/Guardian Email _____

I understand the state of Minnesota legal requirements and St. Francis Area Schools Community Education policies/procedures regarding Behind-the-Wheel instruction. I give the above named student permission to enroll in this program.

Parent/Guardian Signature _____ Date _____

PAYMENT INFORMATION

Check (payable to: Community Education) Cash

Charge: VISA MasterCard Discover Card Holder Signature _____

Card Number _____ Card Code _____ Expiration Date _____