



Driver's Education

**Pillager
School**

Classroom Instruction \$100

3:30 PM - 6:30 PM

In Berent's room #606

Jan 4, 5, 9, 10, 11, 12, 16, 17, 18, 19

Max of 30 students, Minimum of 15 students

January 2023

SUN	MON	TUE	WED	THU	FRI	SAT
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

This session of Driver's Education Class is offered to anyone over 14 years old by the first day of class with Mr. Janicke and Mr. Berent.

Passing this course allows student to secure a driver's permit.

Students must register to be included in the class.

The state law requires 30 hours of instruction. Attendance will be taken at the beginning of class each day. If you are later than 15 minutes to class you will not be given credit for any of the day. Make-up class time will be billed at \$5 per 15 minutes of make-up time.

After the class:

In order to get a Minnesota driver's permit the student must

- ◆ Be at least 15 years old, Pass the permit test given at the driver's testing site in Brainerd, Bemidji, Detroit Lakes, Grand Rapids, St. Cloud,
- ◆ Be enrolled in a behind the wheel driving class that offers six hours of behind the wheel instruction by a certified instructor,
- ◆ Hold a permit for 6 months and be 16 before you can get a license. *Unless receiving a Farm Permit*

Refer to the "The Process for Minnesota Driver's License Checklist" PDF on our drivers education page.

Online Registration is also available

Driver's Education Registration

Deadline December 28

FULL Legal Name		Student Cell Phone	
Parent/Guardian		Parent Contact Phone	
Date of Birth		Student Email	

Release of Liability (This form MUST be signed before registration is complete)

In consideration of your accepting my child or ward's entry, I hereby waive and release any and all rights and claims that I, my child/ward may have against Pillager Public Schools, its servants, agents, or employees, for any and all injuries and other damages arising out of or connected with participation in the activity. I further agree to emergency treatment for my child/ward by a physician or hospital, in the event that I cannot be reached. This waiver is in effect while my child/ward is participating in **Driver's Education** at Pillager Schools.

\$ received _____ Check # _____

Adult Signature _____ Date _____

Date _____