

COMMONWEALTH OF KENTUCKY
School Compliance Verification: KRS 159.051

At the **initial application** for an original Kentucky learner's permit or transfer license only, a 16-17 year old should submit to the local Circuit Court Clerk's Office, **one** of the following documents: (1) proof of graduation from HS, or (2) proof of GED completion, or (3) a signed and *sealed School Compliance Verification: KRS 159.051 (obtained from the student's school district of residence).

STUDENT INFORMATION:

Name: Last _____ First _____ Middle _____

(This section will be completed by a legal parent or guardian and then returned to the school with parent/guardian's signature)

Date of Birth: _____ Last Four Digits of Social Security Number: XXX-XX-_____
Month/Date/Year

PARENT/GUARDIAN CONSENT:

I hereby consent to the release of the above information to the Transportation Cabinet as set forth in KRS 159.051 as it relates to No Pass/No Drive. I fully understand that in order for this form to be issued, my child must be compliant with KRS 159.051.

Parent/Guardian Signature: _____ Date: _____

PUBLIC SCHOOL CERTIFICATION: Kentucky public school personnel should verify that this student is in compliance with KRS 159.051 (i.e., a 16 or 17 year old student shall be deemed compliant, if he/she has less than 9 unexcused absences and has passed 4 of 6 courses, or the equivalent, in the preceding semester).

District: _____ Full Name of School: _____

School Telephone Number: (____) _____

School Address: _____
Street City County Zip Code

I hereby certify that this public school student is in compliance with KRS 159.051, as it relates to No Pass/No Drive.

Designated Public School Representative: _____ / _____ / _____
Signature Print Name Title

Date: _____

PRIVATE SCHOOL CERTIFICATION (Includes Home Schools): School information to be completed by the designated representative of the Kentucky private school/home school to certify their student's compliance with KRS 159.051 (i.e., a 16 or 17 year old student shall be deemed compliant, if he/she has less than 9 unexcused absences and has passed 4 of 6 courses, or the equivalent, in the preceding semester).

Full Name of School: _____ School Telephone Number: (____) _____

School Address: _____
Street City County Zip Code

I hereby certify that this private/home school student is in compliance with KRS 159.051, as it relates to No Pass/No Drive.

Private/Home School Representative: _____ / _____ / _____
Signature Print Name Title

Date: _____

OUT-OF-STATE SCHOOL CERTIFICATION: To be completed by the out-of-state school representative to certify their Kentucky resident's compliance with KRS 159.051 (i.e., a 16 or 17 year old student shall be deemed compliant, if he/she has less than 9 unexcused absences and has passed 4 of 6 courses, or the equivalent, in the preceding semester).

Full Name of School: _____ School Telephone Number: (____) _____

School Address: _____
Street City County Zip Code

OOS School Representative: _____ / _____ / _____
Signature Print Name Title

Date: _____

(Schools should keep a copy of this form for their records)

***Date:** _____ **(expires after 60 days)** ***This form is valid until** _____

Revised 01/01/12(6) * Embossed seal required for all public/private schools (excludes home schools) on or after 01/01/2012