

Behind the Wheel Sign-Up Form

Date:	
Last Name:	First Name:
Date of Birth:	Grade:
Parent Name AND Phone #:	
Address:	
City, State:	Zip Code:
Did you complete the Driver's Ed Class in the classroom or online?	
When did you complete the Driver's Ed Class? (SEMESTER and YEAR)	
Who was your teacher for the Driver's Ed class?	

FOR OFFICE USE ONLY:

Date Received:	Assigned Instructor:
Permit #:	Date Notified Instructor:
Eligibility Date:	Notes:
Expiration Date:	