

SAFE RIDING PRACTICES INSTRUCTION
CLASSROOM INSTRUCTION VERIFICATION

This form is to be filed in the Transportation Department by the end of the first six weeks of the fall semester and again by the end of the fourth six weeks of the spring semester.

School: _____

Date Taught: _____

Grade Level: _____

Objective:

Comments:

I verify that all students attending the above-referenced school received instruction in safe riding practices as required by the Louisiana Department of Education.

Principal's Signature

Teacher's Signature