

DRIVER EDUCATION STUDENT ROSTER
SCHOOL YEAR 20____ - 20____

NAME OF SCHOOL: _____ COUNTY: _____

ADDRESS: _____ CITY: _____ ZIP CODE: _____

SESSION BEGINNING DATE: _____ SESSION ENDING DATE: _____

Any student receiving driver education instruction shall be fifteen (15) years old and a secondary school student to operate a vehicle as part of instruction.	TOTAL NUMBER OF STUDENTS ENROLLED:
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REQUIRED:

A completed student roster signed by the instructor must be kept in the driver education vehicle at all times. When the course is completed, the student's final grades are to be recorded and a copy of the student roster(s) is to be attached to your district's original *Driver Education Application for Prior Year Reimbursement* form. Note: The District must maintain a copy of all driver education forms for their Regional Accreditation Officer (RAO) to verify at each school site.

All students must meet the required thirty (30) hours of classroom and six (6) hours of behind-the-wheel instruction to complete the course.

Student's Name (Alphabetical by last name) Must be EXACTLY as on birth certificate	Student's Date of Birth	Student's Grade Level	Enrollment Card ID No.	Student's Final Grade
1.				
2.				
3.				
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25.				

Signature of Instructor: _____

Driver Education Permit # _____

Duplicate blank copies as needed.