

Louisiana Department of Public Safety and Corrections

OFFICE OF MOTOR VEHICLES

DRIVER EDUCATION REGISTRATION AND COURSE FORM

DRIVING SCHOOL INFORMATION													
Name of Driving School													
Driving School Location													
COURSE INFORMATION- check the course requested													
	Pre-Licensing Course Classroom - 6 hours BTW - 8 hours			Driver Education Classroom - 30 hours BTW - 8 hours			Behind The Wheel Only BTW - 8 hours		Date of Enrollment				
STUDENT INFORMATION													
Name of Student (PRINT First/Middle/Last)								TIP #		TIP Issue Date			
Home Address						City		State		ZIP Code			
Date Of Birth		AGE	Grade	High School Attending (Must be in at a minimum in the 8 th grade)									
CONTACT PHONE NUMBERS													
Home Phone				Parent's Cell				Student Cell					
STUDENT'S DRIVING EXPERIENCE													
Describe locations where you have driving experience. Check all that apply													
<input type="checkbox"/>	None	<input type="checkbox"/>	Subdivision	<input type="checkbox"/>	Parking Lots	<input type="checkbox"/>	Rural Roads	<input type="checkbox"/>	In town	<input type="checkbox"/>	Highway	<input type="checkbox"/>	Interstate
PARENTAL/GUARDIAN CONSENT- TO BE COMPLETED IF STUDENT IS A MINOR													
I do hereby certify that I am the Legal Parent/Guardian of the minor applying and this is my authorization to the above named Driving School to administer the driver education course indicated above. I also declare by my signature below that the information I provided is complete and accurate.													
Signature of Legal Parent/Guardian						Date							
OFFICE USE ONLY													
Classroom Course Dates:				Fees Received:									
				Classroom Fee						Deposit			
				Behind the Wheel Fee						Payment			
				Total Course Fees						Balance			

**DRIVER EDUCATION REGISTRATION AND COURSE FORM
BEHIND THE WHEEL INSTRUCTION**

Student Name	Student TIP #
Driving School Name	

Classroom / OMV Knowledge Test Grades

Classroom Grade: _____ (average of quizzes & Knowledge Test)	OMV Knowledge Test Grade: _____ (place grade on Certificate of Completion as the Classroom grade)
The above listed applicant has successfully completed the Classroom Course of Driver Education with the noted scores.	
Signature of Classroom Instructor	Date

Behind The Wheel Instruction - Must be a minimum of 8 hours of driving time. RIDING TIME DOES NOT COUNT.

Date	Beginning Time	Ending Time	VIN # (Last 6)	Beginning Odometer	Ending Odometer	Instructor Initials	Student Initials	Road Type			
								R	C	H	I
								R	C	H	I
								R	C	H	I
								R	C	H	I
								R	C	H	I
								R	C	H	I
								R	C	H	I
								R	C	H	I
								R	C	H	I
								R	C	H	I

The above listed applicant has successfully completed the Behind The Wheel Course of Driver Education with the noted score.	
Signature of Behind The Wheel Instructor	Date
I, the undersigned, attest to the fact that the above named student has successfully completed the curriculum of a 38 hour driving course as defined in R.S. 32:402.1 & R.S. 32:407. Falsification of any information contained in this certificate will be considered perjury and injury to official public documents.	
Signature of School Owner	Date

DPSMV2410 (R0818)

Road Type = R - Rural C - City H - Highway I - Interstate

DRIVER EDUCATION REGISTRATION AND COURSE FORM

8 HOUR BEHIND THE WHEEL ASSESSMENT

Student Name		Student TIP #	BTW Grade
Instructor Name	Instructor #	Instructor Signature	Date

☐ **Attention**

Fair (2)

- ☐ Does not pay attention
- ☐ Attempts to distract examiner

Bad (4)

- ☐ Does not follow instructions
- ☐ Looks away from road
- ☐ Scores 2 or more under Fair

☐ **Starting/Backing Out**

Fair (1)

- ☐ Jerky start
- ☐ Races engine
- ☐ Backs too fast
- ☐ Puts car in drive

Bad (2)

- ☐ Hand brake not released
- ☐ Does not check traffic
- ☐ Spins wheels when starting
- ☐ 2 or more attempts to back
- ☐ Scores 2 or more under Fair

☐ **Traffic Signal**

Fair (4)

- ☐ Stops too close to vehicle
- ☐ Stops abruptly
- ☐ Brakes hard on yellow light
- ☐ Does not start promptly
- ☐ Stops past stop line

Bad (6)

- ☐ Stops too far back
- ☐ Starts before light changes
- ☐ Speeds up at yellow light
- ☐ Stops at green light
- ☐ Does not check traffic
- ☐ Scores 2 or more under Fair

☐ **Time**

Fair (2)

- ☐ Drives too slow
- ☐ Drives too fast

☐ **Following**

Bad (4)

- ☐ Tailgates-3 second rule

Left Turns (2)

☐ ☐ **SIGNALS**

Fair (2)

- ☐ Signal given too close
- ☐ Signal not given
- ☐ Signal given too far away

Bad (4)

- ☐ Improper signal given
- ☐ No signal given
- ☐ Scores 2 or more under Fair

☐ ☐ **VEHICLE SPEED**

Fair (1)

- ☐ Brakes unnecessarily

Bad (2)

- ☐ Turns too fast/too slow

☐ ☐ **LANE USAGE**

Bad (4)

- ☐ Crowds other vehicle(s)
- ☐ Makes wide turn
- ☐ Makes short turn

☐ **Intersection (Stop)**

Fair (4)

- ☐ Stops too close to vehicle
- ☐ Stops abruptly
- ☐ Does not start promptly
- ☐ Stops past stop line

Bad (6)

- ☐ Stops too far back
- ☐ Brakes hard on yellow light
- ☐ Stops at green light
- ☐ Scores 2 or more under Fair

☐ **Lane Usage**

Fair (3)

- ☐ Too slow for left lane
- ☐ Does not keep vehicle in lane

Bad (4)

- ☐ Changes lanes unnecessarily
- ☐ Straddles lanes
- ☐ Does not keep vehicle centered
- ☐ Scores 2 or more under Fair

Right Turns (2)

☐ ☐ **SIGNALS**

Fair (2)

- ☐ Signal given too close
- ☐ Signal not given
- ☐ Signal given too far away

Bad (4)

- ☐ Improper signal given
- ☐ No signal given
- ☐ Scores 2 or more under Fair

☐ ☐ **VEHICLE SPEED**

Fair (1)

- ☐ Brakes unnecessarily

Bad (2)

- ☐ Turns too fast/too slow

☐ ☐ **LANE USAGE**

Bad (4)

- ☐ Crowds other vehicle(s)
- ☐ Makes wide turn
- ☐ Makes short turn

☐ **Straight in Parking**

Fair (3)

- ☐ 2 attempts to park
- ☐ Not centered in space
- ☐ Hits curve with bumper/tires

Bad (5)

- ☐ 3 attempts to park
- ☐ Vehicle not fully in space
- ☐ Backs without turning head
- ☐ Does not properly park
- ☐ Scores 2 or more under Fair

☐ **Stop Sign**

Fair (4)

- ☐ Stops past stop line
- ☐ Stops too close to vehicle

Bad (6)

- ☐ Brakes hard
- ☐ Does not check traffic
- ☐ Scores 2 or more under Fair

☐ **Lane Change**

Fair (3)

- ☐ Does not check traffic
- ☐ Does not check blind spots
- ☐ Does not blend smoothly
- ☐ Does not cancel signal

Bad (5)

- ☐ Does not leave a safe gap
- ☐ Does not signal
- ☐ Brakes unnecessarily
- ☐ Scores 2 or more under Fair

Automatic Failures	
	Accident
	Run Stop Sign
	Speeding over 5 MPH
	Runs Red Light
	Dangerous action/incident
	Does not follow instructions

Maneuvers are underlined.

*****Every section must be graded*****

Score each maneuver with a ☒ or **X**
A check (☒) mark indicates that this section was completed correctly with 0 points off.

Place an **X** were an error was made.
A Fair or Bad score shall be deducted.

The **BAD number** is the most that can be deducted for each maneuver.

Comments: _____