



DRIVER EDUCATION STUDENT ROSTER
SCHOOL YEAR 20_____ - 20 _____

REQUIRED: A completed student roster signed by instructor must be kept in the driver education vehicle at all times.

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:
---	---

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 #	Student's Final Grade
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				
26.				
27.				
28.				

Print Name of Instructor: _____ Driver Education Permit # _____

Signature Of Instructor: _____