



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: _____

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|---|---|
| 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 |
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Print Name of Instructor: _____ Driver Education Permit # _____

Signature Of Instructor: _____