

PARENTAL CONSENT FOR ONLINE DRIVER EDUCATION EXAMINATION

Purpose: Use this form to give consent for students under age 18 to take the online drivers education examination at the driver training school that offered the online course.

Instructions: The student's parent/guardian must complete this form. The completed form must be submitted to the DMV-licensed driver training Instructor at the test site prior to taking the examination.

STUDENT INFORMATION

STUDENT FULL LEGAL NAME (print) (last) (first) (middle) (suffix)				BIRTH DATE (mm/dd/yyyy)
STREET ADDRESS		CITY	STATE	ZIP CODE

TEST SITE INFORMATION

SCHOOL NAME				
SCHOOL STREET ADDRESS		CITY	STATE	ZIP CODE
SCHOOL PHONE NUMBER ()		SCHEDULED TEST DATE		

PARENT/GUARDIAN SIGNATURE

By signing this form, I give consent for my child to take the online driver's education examination at the driver training school that offered the online course. I understand that the examination will be administered and monitored by a DMV-licensed Instructor. I understand that my child must present an acceptable form of identification prior to being allowed to take the test. DMV acceptable identification documents include:

- DMV issued Learner's Permit/Identification Card
- Passport
- School ID
- Government issued ID

Failure to present proper identification will result in my child not being allowed to take the final examination. I certify and affirm that all information presented in this form is true and correct. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.

PARENT/GUARDIAN NAME (print)	PARENT/GUARDIAN SIGNATURE	DATE (mm/dd/yyyy)
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“Online Drivers Education”

- Instructor’s Choice Driving School have partnered with National Driver Training /Driver Education Internet Training (DEIT)
- The program consist of at least 30 hours of instructions and includes components about alcohol safety, drug abuse awareness, aggressive driving, distracted driving, pedestrian and bicycle safety, handicapped parking, fuel efficient practices, motorcycle awareness and organ and tissue donation awareness as required by law.
- You must at least 15 years and 6 months old to take the online driver’s education course. All individuals who elect to take the classroom component of the driver’s education course online must take the online course through a DMV licensed driver training school. Home school students are exempt from this requirement.
- In order to benefit from the course, you must be able to work independently and be comfortable with using a computer.
- Steps to register & logon for the online course:
 - a. Parents must complete DTS 62 Parental Consent for Online Driver Education Course & sign agreement with Instructor’s Choice Driving School.
 - b. Pay required fee(in full)
 - c. Student will receive login & password
 - d. Login on and complete the course @ <http://www.usdrivertraining.com/login-va.php> Ctrl & click to go to link
- Test Procedures:

On the day of testing, you must bring the following to the test site:

 1. Photo identification (DMV issued identification card, school issued identification card, valid passport or military identification)
 2. Proof of completion of the online driver education course
 3. A completed ‘Parental Consent for Online Driver Education Examination” (DTS 62), if you are under age 18
 4. Proof of completion of the additional 90 minute parent/teen course if you are under 18 and live in Planning District 8 (counties of Arlington, Fairfax, Loudoun and Prince William and cities of Alexandria, Fairfax, Manassas and Manassas Park)
 5. The online driver Training school will provide a computer for testing. The location of the test site is 118 E. Broad Street Suite A, Falls Church, VA 22046. The testing hours are 3:30 pm – 6:30 pm Monday thru Saturday otherwise by appointment. Appointments are highly suggested.
- DEIT phone number is 800-942-2050
- Email address is reg@nationaldrivertraining.com
- **The DMV is committed to promoting transportation safety through the certification of quality training programs. If you have comments or concerns about this course, call toll free 1(877)885-5790.**

Instructor's Choice Driving School

1826 N. Columbus Street Arlington, Virginia 22207
Phone (703)527-4444 Fax (703)243-5503 ic4444@verizon.net 181015

Administrative Agreement

ONLINE CLASSROOM

1. Course Length: The Virginia State Drivers Education program consist of two phases. The in-car phase consist of a minimum of seven periods of actual driving and seven periods of observation. Normally two periods of instruction are given during each session. The online classroom phase consist of 7 levels of classroom instruction (approximately 30 hours). We have partner with National Drivers Training LLC (NDT) to provide the online training. **Once enrolled, any issues about that course must be directed to NDT. THERE WILL NO REFUNDS FOR UNSUCCESSFUL COMPLETION/WITHDRAWAL.**

Your enrollment date/time is _____

2. Scheduling in-car: Students are responsible for scheduling in car instruction. We have found that scheduling your next lesson while in car works best. Missed lessons in car are coordinated directly the assigned in car instructor.

3. Method Of Payment/Price: Choose one below by **initialing the desired program:**

- \$430.00 (online classroom & in car)
 \$199.00 Classroom Only

NO CHANGES WILL BE ALLOWED AFTER ENROLLMENT UNLESS APPROVED BY MANAGEMENT & ADDITIONAL FEES REQUIRED.

Tuition is paid in advance of instruction. There will be a \$35.00 fee for any returned checks. The return check fee doubles if arrangements are not made within a week of notification. The term of payment are: checks, cash, credit card & PayPal.

4. Refunds: All refunds must be requested in writing within one year. Students will be charged \$45.00 for each in car lesson performed. Credit card users will incur a 4% chargeback fee. The school will refund pro rated fees, if unable to perform its part of this agreement within a reasonable time. **One hundred (\$100) is non refundable. Allow two(2) to four (4) weeks for refund.**

5. Additional Fees: Students must cancel in-car lessons & parents class 24 hours in advance or be subject to a \$25.00 fee. Students who cancel more than three times (regardless of notice) will be subject to a \$25.00 fee. There will be a \$35.00 fee any document research or replacement of completion papers. Additional lessons/private lessons \$45 per hours. Additional road test are \$20 and additional online level 7 final test appointments are \$25.00.

6. This instruction does not guarantee that any student will pass the state

driver's license test or that the student will be guaranteed employment upon completion of this course.

7. Students 17 years and under are required to complete a state approved driver's education program prior to receiving a driver's license. Students 18 years or older may hold the learner's permit for 60 days in lieu of completing a driver education program.
8. The DMV is committed to promoting transportation safety through the certification of quality training programs. If you have comments or concerns about this course, call toll free 1(877)885-5790.
9. If one-on-one driving training is permitted, the student is required to meet the observation requirements with at least one other students in the vehicle during in vehicle training. **ONE-ON-ONE TRAINING IS NOT PERMITTED AS PART OF THIS AGREEMENT.** In addition, students under age 18 and a parent are required to attend a 90 minute driver education class prior to course completion. Both student and parent are required to sign an Affirmation of Attendance DTS-90, to acknowledge completion of the required 90 minute component.
10. **THIS AGREEMENT EXPIRES 90 DAYS AFTER ENROLLMENT AND THE CURRENT AGREEMENT TERMS WILL APPLY. ONE YEAR AFTER ENROLLMENT, STUDENTS FORFEIT ANY REMAINING LESSONS, RIGHT TO A REFUND AND REENROLLMENT FEE IS REQUIRED (IF APPROVED BY MANAGEMENT).**

Student Signature _____ Date _____

Parent Signature _____ Date _____

Instructor's Choice Driving School LLC. Signature _____

Student Name _____

Address _____

City & Zip _____

Phone _____

Email address _____