

2008-2009
SHS STUDENT APPLICATION FOR TRAFFIC SAFETY EDUCATION

LEGAL NAME _____ AGE _____ SEX _____ DATE _____
ADDRESS _____ PHONE _____
CITY _____ BIRTHDATE _____ GRADE LEVEL _____
PARENT/GUARDIAN NAME _____ PH. # _____

I wish to apply for Traffic Safety Education at Skyline High School for the _____ (class 1 fall, 2 winter, 3 spring) session. I understand that classroom and behind the wheel lessons represent a two-phase program, and that they are graded separately. I also understand that the classroom teacher or Traffic Safety Coordinator will schedule behind the wheel driving times. I will need to be available at those scheduled times. I understand that absences from behind the wheel driving sessions are reason for failure. I will also provide my own transportation to and from Skyline High School for class time and the behind the wheel portion of the class.

I am willing to give the necessary time in order to fulfill the requirements of this accredited course as prescribed by the State Department of Public Instruction. I understand that to successfully complete this course, I will:

1. Receive classroom instruction and earn an 80% or better.
2. Satisfactorily participate in the prescribed number of behind the wheel lessons.
3. Practice driving at home in my parent's/guardian's vehicle with their supervision.
4. Pass a behind the wheel test given during driving lessons.
5. Meet attendance requirements distributed at the beginning of the course.
6. Classroom attendance is of extreme importance. Students may not miss more than two classroom sessions for any reason and still pass the requirements for certification.
7. Students must attend all scheduled driving sessions. A \$35 fee will be charged for each missed driving session.

It is further understood that in order to make this program possible, it is necessary to pay a classroom and behind the wheel fee of \$425.00 dollars. This is payable to **Skyline High School AT THE TIME OF REGISTRATION**. If I fail the behind the wheel portion, I understand that to repeat the class I must pay a \$425.00 dollar repeat fee. It is also required that I be at least 15 (fifteen) years of age at the beginning of the current class in which I am enrolled to qualify for the program. I understand that **I MUST have my Washington State Instruction Permit by the first driving session, and have it in my possession while driving**. A waiver for obtaining the permit without taking the test can be obtained on the first day of class from your classroom teacher.

.....detach and return to instructor.....

Student Signature

I fully approve of my DAUGHTER/SON taking part in the Skyline High School Traffic Safety Program set forth in this application.

Parent/Guardian Signature

Date