

# Northern Michigan Driving School, LLC.

246 North Estates Drive, Gaylord, MI 49735 (989) 732-2727

Office Hours: Monday-Friday 3:30pm-5:00pm

## DRIVER EDUCATION SEGMENT II

I, the undersigned, agree to pay Northern Michigan Driving School, LLC, Dollars Fifty (\$50.00) for the described driver's education course, which includes six hours of classroom instruction. This course is approved by the Michigan Department of State. **For a student to participate in Segment 2, verification must be received that the student has completed a minimum of 30 hours of driving (including 2 hours at night) with a licensed parent or guardian (or parent designee) on a Level 1 license, which has been held for not less than 3 continuous months.**

## GENERAL STATEMENT

Northern Michigan Driving School will provide a minimum of 6 hours of classroom instruction provided by a certified instructor. Classroom instruction shall not exceed 2 hours per day. At the conclusion of this course, students are required to complete the State Test with a score of 70% or higher. A student is permitted one retake of the State Test. After attending all of the 6 hours of lecture and passing the test, the student may be permitted to receive his/her Michigan Driver Education Segment 2 Certificate of Completion. If a student does not pass the driver's education Segment II classroom requirements, they will remain in the driver's education program until all requirements are fulfilled.

**Classroom Instruction:** Northern Michigan Driving School will use the state approved ADTSEA Driver Education 3.0 Curriculum and Segment 2 Driver Education Risk Awareness Facts Sheets. **Absences:** If a student does not meet the minimum 6 hour State requirement, he/she must make arrangements with the instructor to make-up missed classroom instruction.

**Method of Payment:** Cash, check, or money order will be accepted on the first day of class. All fees are due on the last day of class.

**Classroom Conduct:** I understand that I will be expelled from the course if I do not conduct myself properly while in or about the class facilities and show due respect to my instructors, as well as my fellow students. If I am expelled from the course, the refund formula described below will be applied.

**Please bring with you to the first class session:** Permission slip/contract, tuition payments, notebook and pen/pencil, driving log, Michigan Level One License.

**Refund Policy:** A 50% refund will be given after the first class session. Thereafter, no refunds will be issued.

**Notice:** This school is required to be certified by the Secretary of State. If you have any complaints, which you cannot settle with this school, write: Michigan Department of State, Driver Program Division, Lansing, MI 48918. Completion of driver training instruction does not guarantee qualification for a driver license.

Provider Certificate Number: P000606 (Program #'s6-B8-19, 7-B9-19, 8-B10-19)

**Class Location:** **Gaylord St. Mary's High School** 321 N. Otsego Ave. \*use Mitchell street entrance  
\*\*\*\*Class time: 11:00am-1:00PM

## Segment II sessions:

\_\_\_\_\_ **June 17,18,19**  
\_\_\_\_\_ **July 15,16,17**  
\_\_\_\_\_ **August 12,13,14**

STUDENT'S  
FULL NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_  
(Last) (First) (Middle)

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE (PARENT OR GUARDIAN): \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_ HOME PHONE (PARENT): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PARENT OR GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
NMDS REPRESENTATIVE SIGNATURE