#### **Negaunee Public Schools**

500 W Arch St, Negaunee, MI 49866, Phone: (906) 475-7861 Ext. 301, Fax: (906) 475-7989 State Certification # P000070 · NHS Office Hours: Monday – Friday, 7:00 AM – 3:15 PM

Program Number #: 23-2-12/18 DRIVER'S EDUCATION SEGMENT 2 CONTRACT Classroom Location: Negaunee High School

## PLEASE KEEP THIS PAGE FOR YOUR REFERENCE

Cost (due at first class day): \$50

**Class dates:** March 11th, 12th, and 13th from 6:00 – 8:00 PM

**Location:** NHS Library

#### **DRIVERS SEGMENT 2 PROVISIONS**

- 1. Negaunee Public Schools will provide a minimum of 6 hours of classroom instruction with a certified Michigan Driver Education Instructor. Classroom instruction shall not exceed 2 hours per day.
- 2. A driving log must be presented to verify that the student has **completed a minimum of 30 hours of driving (including 2 hours at night)** with a licensed parent/guardian or a designated licensed adult driver 21 or older. A log was presented to the Segment 2 instructor on or before the first classroom session.
- 3. The Student must have held a Level 1 License for **at least 3 continuous months** from the date on your Level 1 License issued by the Secretary of State (SOS).

#### **DRIVERS SEGMENT 2 TERMS**

- 1. The Parent or Legal Guardian agrees to pay the total amount of **\$50 on the first day of class** in the form of cash or check made out to NPS.
- 2. The Student may miss class only for an illness or emergency with documented proof presented to the instructor. The student is required to make up for missed class time. Make up time will be Tuesdays from 2:50 3:50 PM by email appointment request mike.johnson@negauneeschools.org.

#### **REQUIREMENTS TO PASS THE COURSE**

- 1. The Student must take part in daily quizzes/tests.
- 2. The Student will be allowed up to two attempts to pass the State Exam, which requires a score of at least 70%.

### **REFUND POLICY**

1. After the **beginning of the second** class session, NO REFUND shall be given.

NOTICE - This provider is required to be certified by the Secretary of State. If you have any complaint that cannot be settled with the provider, please complete the Driver Education Complaint form found on the Department of State website; <a href="www.michigan.gov/teendriver">www.michigan.gov/teendriver</a>. Completion of driver education instruction <a href="does not guarantee">does not guarantee</a> qualification for a driver license.

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# This form must be turned in at the NHS office or emailed to Raquel.Randall@NegauneeSchools.org **no later than Wednesday, March 6th!**<u>Please fully fill out all of the following legibly.</u>

vvv Legal name that is on birth certificate vvv

Last Na	me	First Name		Middle Name
Address:		City:		Zip:
Phone #:		Age:	D.O.B.:	
Parent/Legal Guard	dian's Name:		Email: _	
Parent/Legal Guard	dian's Address:	Ci	ity:	Zip:
Emergency Contac	t:	Pł	none #:	
** Level 1 lice	nse # (from SOS on chi	ild's license)		
Parent or	student initials	Segment 2 instructo	or initials	
** Driving	g log must have completed	d a minimum of 30 hours (i	including 2 h	ours at night)
	student initials			
	IONS/MEDICAL CONDI	_		
		commodations to participate in ase explain:		
Date:	Student Signature:			
Date:	Parent/Legal Guardia	n Signature:		
Date:	Negaunee Public Schoo	ols by:Signature of De	esignated Renre	sentative
		· ·		
]	RECORD OF PAYMENT (T	O BE COMPLETED BY SCH	OOL OFFICL	<u>AL)</u> :
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