

THIS FORM MUST BE COMPLETED AND RETURNED TO THE COMMUNITY SCHOOL OFFICE.
Student I.D./Contract Number: DT 321

Gwinnett County Schools Contract for Driver's Education
Peachtree Ridge Community School, 1555 Old Peachtree Rd. Suwanee, GA, 30024

This is a contract for 6 hours of Behind the Wheel Drivers Education Instruction. If you have any questions, please contact the PRHS Community School. The telephone number is 678-512-6040.

Dates: _____	Times: _____
--------------	--------------

Parent/Guardian Initial on the blanks below – 6 Hours of Road Instruction Drivers Education REQUIREMENTS:

_____**Proof of completion in a DDS Certified Drivers Education class (30 hours) is required prior to the Behind-the-Wheel Driving Instruction.**

_____**Student must have basic driving skills before taking Drivers Education class.**

_____**The cost of the Behind the Wheel Driver's Education course at PRHS Community School is \$280. This fee includes 6 hours of road instruction. A copy of the student's learner's permit must be submitted with payment and completed contract.**

_____**This school is licensed by the Georgia Department of Driver Safety (DDS), which requires that each student complete 30 hours of classroom instruction and 6 hours of road instruction. Student must complete all Drivers Education requirements within 90 days from the date of the contract or certificate will be forfeited. Drivers Education Certificates can be picked up at the Community School Office approximately two weeks after the student has finished their last scheduled Driving appointment. If the student fails to appear for a pre-scheduled driving appointment or additional road instruction is requested the fee of \$45 per hour will be paid.**

_____**It is the responsibility of the parents to provide transportation for the student to and from the Driver's Education driving appointments located at Peachtree Ridge High School. All Gwinnett County school rules are in effect while a student is on campus and while participating in the driving portions of the class. The completion of the course does not in any way, directly or indirectly, imply that the student will receive his/her driver's license from the state of Georgia or any other state.**

_____**Notification of cancellation must be received within 2 business days prior to the first scheduled driving appointment in order to receive a full refund. No refunds are given once the instruction has begun. The road instruction may be forfeited if the student neglects to notify the driver education instructor that he/she is not able to drive during the assigned time. The student has 90 days from the date of the contact to complete the driving instruction.**

COMPLETE ALL BLANKS BELOW. (Please Print)

Student FULL LEGAL Name _____ Birthday _____

PRHS student? Y__ N__ If not, which school? _____ Student School I.D. _____

Learner's Permit # _____ Expiration Date _____ Restrictions _____

Parent/Guardian: _____ Cell # _____ Student Phone # _____
Address, City, State, Zip _____

PERSON RESPONSIBLE FOR THE PAYMENT

Name (print) _____ Daytime Phone _____

Address, City, State, Zip _____ E-Mail _____

Signatures indicate that student and parent understand and agree to the information contained in this contract.

Student's Signature _____ Date _____ Parent's Signature _____ Date _____

PAYMENT: Through MyPaymentsPlus or Check payable to Peachtree Ridge Community School. Fee - \$280
Cash (receipt) _____ Check # _____ MPP Confirmation # _____