



**DRIVER'S EDUCATION
Student Packet Checklist**

Student Name: _____

Class Start Date: _____

Document	Completed
Copy of Learner's Permit	
Waiver	
Photo Release Form	
Student Log Form	
Redemption Code (please print clearly)	
Student/Parent Contract	

(applies only to recipients of grant scholarship)

(leave blank/contract provided on first day of class)

Parent/Guardian Name

Parent/Guardian Email

Parent/Guardian Daytime Telephone Number

Scan ALL ITEMS on checklist above. Email to driversed@laniertech.edu.

OFFICE USE ONLY	
Enrolled/Paid	
Driving session 1	
Driving session 2	
Certificate sent	

**CONSENT BY PARENT OR LEGAL GUARDIAN FOR RELEASE OF
DRIVING INFORMATION AND WAIVER**

I, _____ (parent or legal guardian), hereby voluntarily consent on behalf of, _____ (student), a minor, to the release of all information held by the Georgia Department of Driver Services or any other federal, state or local government organization of any type, including, but not limited to, law enforcement agencies of federal, state or local government, that relates in any way to the minor's operation of a motor vehicle in the State of Georgia or elsewhere. I grant this consent in furtherance of my request for the minor's participation in driver education activities or courses offered in conjunction with the Georgia Driver's Education Commission, the Governor's Office of Highway Safety or the Technical College System of Georgia and this request applies to requests for information submitted by any or all of said agencies of the State of Georgia.

I understand that audio, video, and GPS recording devices may be used as a part of the driver's education course. Some of the vehicles provided for driver education are equipped with recording devices that record audio and video inside the vehicle cab, video facing outboard the front windshield, and GPS recording. I understand that such audio, video, and GPS recording devices are in use and consent to their use. I further consent to GDEC, TCSG, and the driver education provider using pictures, audio, and video, obtained from said recording devices, for training and PR purposes.

I understand that the minor's participation in the driver education activities or courses could expose the minor to personal or bodily injury, including death. I understand that the risks that the minor may encounter include, but are not limited to, transportation accidents. In the event of a transportation accident, which could include bodily or personal injury, or even death, I, as the parent or legal guardian of the minor, am responsible for all costs, including but not limited to, the costs of medical care.

I understand, and hereby acknowledge, that the minor is not obligated or required to participate in the driver education activities or courses offered in conjunction with the Georgia Driver's Education Commission, the Governor's Office of Highway Safety or the Technical College System of Georgia. In exchange for the instruction, use of equipment, materials and supplies by my child, and his/her being allowed to participate in this driver's education course, I waive any and all claims and causes of action related to the minor's participation and hereby jointly release, acquit and forever discharge the State of Georgia, the Georgia Driver's Education Commission, the Governor's Office of Highway Safety, and the Technical College System of Georgia, their respective officers, members, directors, including its past, present, and future subsidiaries, divisions, agencies, instrumentalities, successors, agents, servants, representatives, employees, affiliates, partners, heirs, administrators, personal representatives, assigns, attorneys and volunteers.

This consent is given freely and voluntarily by me, on behalf of the aforementioned minor, without coercion, duress, threat or promise of any kind and shall remain in effect for a period of ten (10) years after the date of signature below or until revoked in writing by the minor upon the minor reaching the age of majority. Revocation of consent must be in writing and delivered to Lanier Technical College, Deal Hall, 2535 Lanier Tech Drive, Gainesville, Georgia, 30507.

By signing below, I certify that I am the legal guardian of the aforementioned minor, that I am 18 years of age and am otherwise fully competent to give this consent.

Dated this ___ day of _____, 20___.

Signature of Parent or Legal Guardian: _____

Printed name of Parent or Legal Guardian: _____

Printed name of Student: _____

Student's Driver's License Number: _____



PHOTO RELEASE FORM

Date: _____

Lanier Technical College has my permission to use photos of
_____, a minor child in publications.

Signature

Name (Please Print)

Address

City

State

Zip

Driver Training Student Log / Record of Instruction

PLEASE COMPLETE TOP SECTION ONLY. PRINT CLEARLY.

Student Name: _____ Date of Birth: _____

Student Address: _____ Home Phone: _____

_____ Contact Phone: _____

Student Permit/Driver's License #: _____ Permit/ DL Issue Date: _____

DT Contract #: (Office use only) _____ Expiration Date: _____

Classroom Instruction:

	Date	Start Time	End Time	*Attendance Code	Instructor's Initials	Comments
Session 1						
Session 2						
Session 3						
Session 4						

**Attendance Code: A - Absent P - Present W - Withdrawn*

Behind-The-Wheel Training:

	Date	Start Time	End Time	*Driving Code	Vehicle # or Tag #	Instructor's Initials	Comments
Session 1							
Session 2							
Session 3							

Driving Code: IT - In Town I - Interstate O - Observation N - Night P - Parking R - Residential*

*** Observation time (student time in the vehicle not behind the wheel) does not count towards the minimum six hours behind-the-wheel training and this time should be recorded on a separate line from other training so that it is not counted.*

For a 30/6 certificate, this student must have completed a minimum of 30 hours of classroom instruction and achieved a minimum score of 70 for the class followed by 6 hours of actual behind-the-wheel training.

Instructor's Signature: _____ DT School Cert #: **TCNR0011**

Instructor's Cert #: _____ Date of Completion: _____

Comments: _____

