

Turner School Of Driving (TSOD)

20490 Harper Avenue • Harper Woods • MI • 48225 • (586) 443 – 6717
State Certification # P000723 • Office Hours: Saturday 10:00 a.m. – 2:00 p.m.

Program Number #: _____ **TEEN SEGMENT 1 CONTRACT** Classroom Location: Harper Woods

(last) _____ (first) _____ (middle) _____

Address: _____ City: _____ Zip: _____

Student cell: _____ Student email: _____ Age: _____ D.O.B.: _____

Parent/Legal Guardian's Name: _____ Parent/Legal Guardian's Phone #: _____

Parent/Legal Guardian's Address: _____ City: _____ Zip: _____ Parent email: _____

Emergency Contact: _____ Phone #: _____

Dates of Class: _____ Time: _____

TEEN SEGMENT 1 PROVISIONS

1. Turner School of Driving will provide a minimum of 24 hours of classroom instruction, 6 hours of behind-the-wheel (BTW) instruction and 4 hours of observation time with a certified Michigan Driver Education Instructor.
2. Segment 1 contains 11 days of classroom instruction, plus 11 exam day. Classroom instruction will not exceed 2 hours per day. Behind-the-wheel instruction will not begin until the student has completed a minimum of 4 hours of classroom instruction. The student must be available to complete behind-the-wheel training on the scheduled days outlined by the driving school to ensure timely completion of the Driver Education program.
3. Turner School of Driving will conduct the BTW instruction in a dual-controlled automobile that is insured by the Provider to cover each student enrolled in the program.
4. The Student must be at least 14-years and 8-months of age by the first day of a Segment 1 course. Verification by birth certificate or passport is required before the first day of class instruction.

TEEN SEGMENT 1 TERMS

1. The Parent or Legal Guardian agrees to pay the total amount of \$360 on or before the first day of class in the form of; cash, debit card, credit card or **Cash App to \$Turnerdrives***.
2. If a student misses a class session due to an emergency or an illness, the student must present documentation. All students are required to make up any missed class sessions. There is a **\$35 fee to recover each missed class session**. Students **will not** be permitted to take the state of Michigan exam for Driver Licensing or receive the certificate of completion until all course requirements have been met.
3. Students are expected to attend all scheduled drives. Missed drives due to tardiness or "no-show" will incur a \$50 fee rescheduling fee per occurrence.
4. A fee of \$50.00 will be charged for each lost or damaged textbook or workbook, if applicable. \$10 workbook replacement fee. Textbooks are due by exam day. **Note: Certificates of completion will be withheld until textbooks have been returned or \$50 replacement fee has been paid.**
5. A fee of \$10.00 will be charged for each request for a replacement of a Segment One/Two Completion Certificate.

REQUIREMENTS TO PASS THE COURSE

1. The Student must complete all 11 days of classroom instruction, 6 hours of behind-the-wheel training, 4 hours of behind-the-wheel observation and pass the state exam for Driver Licensing with a 70% passing score before certificate of completion will be issued.
2. The Student will be allowed up to three attempts to pass the State Exam, which requires a score of at least 70%. If student does not pass by the third attempt, the student will be given the opportunity to take a Refresher course (classroom instruction only) for a fee \$175. This will allow an additional 3 attempts to be taken the following month only.

REFUND POLICY

1. Full refund will be issued, minus bank processing fee, if student withdraws no later than the Friday before class begins. If the student canceled within 1-2 days prior to start of class, half of monies paid will be returned. Otherwise, the student will be allowed one courtesy transfer to a different class at no cost. No refunds will be given the day of class or beyond

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 DES-P11 Statement of Complaint form found on the Department of State website; Michigan.gov/DriverEd. Completion of driver education instruction does not guarantee qualification for a driver license.

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BEHIND-THE-WHEEL WAIVER

Section 33 (d) of the Driver Education Provider and Instructor Act requires that at **least two students must be in a vehicle during BTW instruction** unless a parent waives this requirement in writing.

I, the Parent/Legal Guardian of the Student, **waive this requirement.**

I understand that my son/daughter must still complete at least 4 hours of observation time as a passenger in a driver education vehicle being driven by another driver education student.

Date: _____ Student Signature: _____

Date: _____ Parent/Legal Guardian Signature: _____

Date: _____ Turner School of Driving By: _____ Owner/Designated Representative
Provider Name Signature of Provider Owner Title)

ACCOMMODATIONS/MEDICAL CONDITIONS

1. Does the Student require any special accommodation(s) to participate in the classroom phase (e.g., test being read, interpreter, etc.)? Yes No If Yes, please explain: _____
2. Does the Student require any special accommodation(s) to participate in the BTW phase (e.g., adaptive devices, interpreter, etc.)? Yes No If Yes, please explain: _____
3. Are there any medical conditions that would pose a concern with the Student's BTW instruction (e.g., epilepsy, color blindness, etc.)? Yes No If Yes, please explain: _____
4. Is the Student taking any medications that may affect his/her ability to drive a motor vehicle safely? Yes No If Yes, please explain: _____
5. Is the Student's visual acuity at least 20/20? Yes No If not, is it corrected with glasses or contact lenses? Yes No
6. In the last six months, has the Student had a fainting spell, blackout, seizure, or other uncontrolled loss of consciousness? Yes No
7. In the last six months, has the Student had a physical or mental condition which would affect his/her ability to drive a motor vehicle safely? Yes No

If the answer to any of questions 6– 7 is Yes, then the Parent/Guardian must provide a letter signed by the Student's physician indicating that the condition has been corrected and/or is under control and the Student meets the physical and mental requirements for a motor vehicle operator's license under Section 309 of the Michigan Vehicle Code, 1949 PA 300, MCL 257.309.

Date: _____ Student Signature: _____

Date: _____ Parent/Legal Guardian Signature: _____

Date: _____ Turner School of Driving By: _____ Owner/Designated Representative
Provider Name Signature of Provider Owner Title)

VISION SCREENING TEST

I, _____ have been administered a vision screening test
(SIGNATURE OF STUDENT NAME) on _____
(DATE)
by _____ and received a visual acuity score of at least 20/40 corrected.
(INSTRUCTOR NAME)
Payment amount: _____ Date(s): _____ Type: _____