**BEGINNING SCHOOL BUS DRIVERS** Revised 4/12/2019

**2019-2020 ENROLLMENT AND VERIFICATION FORMS**

PLEASE RETURN TO: Lynette Altman at lynettealtman@kentisd.org or by FAX**: 616-447-2440**

Please enroll the following driver in the next new driver safety education class to be administered by Kent ISD:

**PLEASE TYPE OR PRINT**

**Driver's Name:**  **SEX (M)/(F)** (Legal name as it appears on driver’s license) (Circle One)

**Driver's Address:**

(Street) (City) (Zip)

**Date of Birth:**

**Driver/Chauffeur License Number:**  - - - -

**Employing School District:**  **County:**

**Transportation Supervisor:**  **Phone:** ( )

**School Address:** (Street) (City) (Zip)

**(FEE: NO COST) CLASS DATES REGISTERING FOR\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**In order to properly fill out State Reimbursement forms at the end of the year, the following information is needed:**

**Is driver being paid to attend class? (YES) (NO) (Please circle one) Rate being paid: $**

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VERIFICATION

BEHIND THE WHEEL PREREQUISITE TRAINING

**INSTRUCTIONS**: All new school bus drivers **must** be taught to drive a school bus before enrolling in the **Beginning School Bus Driver Course**, beginning July 1, 1983. No person will be issued a **Certificate of Course Completion** until such person has completed the **School Bus Driver Training Program**. A copy of this completed form shall be presented to the approved education agency which conducts the **Beginning School Bus Driver Course** in your area when the **Enrollment Card** is requested. This verification should become a permanent part of the **school bus driver's file**.

**This is to verify that** **has completed the standardized lessons as outlined in the**

Name of New School Bus Driver Candidate

**Michigan Department of Education's School Bus Driver Training Program and, in my judgement, is prepared to enter the Beginning School Bus Driver Course.**

Signature: Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Transportation Supervisor or Trainer)

Enrollment card will be mailed to the transportation supervisor listed above.

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**FOR K.I.S.D. USE ONLY**

1. Fee Paid N/A 6. I.D. Number

2. Check # N/A 7. Course Completion Card Date

3. Certificate of Enrollment 8. Test Score

Date

4. Enrollment Card Expiration 9. Card Expiration Date

5. Class Date