

Dickinson Area Driving School, Inc.

Contract # _____

940 Ford Street, Kingsford, MI 49802

Phone: (906) 828-1945

License #P000029 Program #S1.06.06.24

Business Hours: M-F 3pm – 5 pm (Central Time)

*Hereinafter known as DADS

SEGMENT 1 CONTRACT UNDER 18 APPLICATION AND AGREEMENT FOR DRIVER EDUCATION AND TRAINING (14 years 8 months through 17 years of age)

Classroom instruction is to be provided at Kingsford High School.

Class Dates:

First class on 6/6/2024 is a mandatory parent/ student meeting from 6:00-8:00 pm (Kingsford High School Cafeteria)

- 1. Thursday, June 6, 2024 (6:00-8:00pm)
- 2. Monday, June 10, 2024 (8-10am)
- 3. Tuesday, June 11, 2024 (8-10am)
- 4. Wednesday, June 12, 2024 (8-10am)
- 5. Thursday, June 13, 2024 (8-10am)
- 6. Monday, June 17, 2024 (8-10am)
- 7. Tuesday, June 18, 2024 (8-10am)
- 8. Wednesday, June 19, 2024 (8-10am)
- 9. Thursday, June 20, 2024 (8-10am)
- 10. Monday, June 24, 2024 (8-10am)
- 11. Tuesday, June 25, 2024 (8-10am)
- 12. Wednesday, June 26, 2024 (8-10am)
- 13. Monday, July 1, 2024 (8-10am)

Printed Student Name (full legal name): First _____ Middle _____ Last _____

Student Address: _____

City: _____ Zip: _____

Student Telephone Number (_____) _____ - _____

School Attending: _____

Birth Date: Month _____ Day _____ Year _____

Print Parent Name: _____ **Parent Email** _____

Parent Address: _____

City: _____ Zip: _____

Parent Phone Number: (_____) _____ - _____

Emergency Contact Person (other than parent/guardian): _____ Phone: _____

For Office Use Payment Type	Amount
Check# _____ \$ _____	
Cash \$ _____	

TEEN SEGMENT 1 PROVISIONS

- Dickinson Area Driving School, Inc. 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.
- Classroom instruction must be a minimum of 3 weeks in length and shall not exceed 2 hours per day. BTW instruction shall not begin until the student has received a minimum of 4 hours of classroom instruction and must be completed no later than 3 weeks after the classroom instruction has been completed.
- Dickinson Area Driving School, Inc. will conduct the BTW instruction in a dual-controlled automobile that is insured by the Provider to cover each student enrolled in the program.
- 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 is required.

TEEN SEGMENT 1 TERMS

- The Parent or Legal Guardian agrees to pay the total amount of \$495. Minimum down payment of \$245 due with signed contract (\$50 is a non-refundable deposit). Final balance due by 06/06/2024 (parent meeting). Payments accepted in the form of cash or check.
- The Student and at least one Family Member must attend the mandatory Parent Meeting on the first day of class.
- The Student may only miss one class session for an illness or emergency with documented proof presented to the instructor. Each session has one (2hr) make-up day.
- A fee of \$30.00 will be charged if 24 hours advance notice is not given for a driving appointment cancellation.
- A fee of \$50.00 will be charged for each lost or damaged textbook.
- A fee of \$50 will be charged for any returned checks due to insufficient funds.

REQUIREMENTS TO PASS THE COURSE

- The Student must complete all homework and receive an overall grade of 80% on daily quizzes/test.
- The Student will be allowed up to three attempts to pass the State Exam, which requires a score of at least 70%.
- The Student must pass ALL BTW Performance Objectives, per the Driver Education Provider and Instructor Act (DEPIA), at the instructor's professional discretion with a satisfactory or higher grade.

REFUND POLICY

- Before the beginning of the second class 80%, after the second class no refund shall be given.

***Confirmation emails will be submitted once your child is enrolled in the Segment 1 class. Emails will go out 2-4 weeks after receiving your contract.

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.

BTW 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: _____ Dickinson Area Driving School, Inc. By _____ Owner/President
Provider Name Signature of Provider Owner Title

ACCOMMODATIONS/MEDICAL CONDITIONS

1. Does the Student require any special accommodations 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 accommodations 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 20/40 corrected? 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 questions 5 is No, or either of questions 6 or 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.

Student Signature _____

Parent/Guardian Signature _____ Date: _____

Signature of DADS Official _____ Date: _____

By: Jonathon Hulkkonen, President or Kate Hulkkonen, Vice-President

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******* Forms must be filled out completely*******