

# SUMMER DRIVER'S EDUCATION 2020

## CLASSROOM INSTRUCTION (Cozad Middle School – CPU Lab)

DATES: May 26-29<sup>th</sup> & June 1<sup>st</sup>. TIME: 8:00 A.M. - 12:00 P.M.

## MAKE - UP FOR CLASSROOM INSTRUCTION (Cozad Middle School – CPU Lab)

DATES: May 26-29<sup>th</sup> & June 1<sup>st</sup>. TIME: 1:00 P.M. - 3:00 P.M.

- STUDENTS WILL DRIVE THE MONTH OF JUNE OR JULY. THEY WILL NEED 5 HOURS DRIVING AND 5 HOURS OBSERVING (*one week*). A 5 DAY DRIVING SCHEDULE WILL BE WORKED OUT DURING THE FIRST TWO DAYS OF CLASS.
- FOR STUDENTS AGED 13-14-15-16 YEARS OLD (*Must turn age 14 by October 15<sup>th</sup> to qualify*).
- COST \$285.00

## PROVISIONAL OPERATOR'S PERMIT (POP)

COZAD COMMUNITY SCHOOLS HAS BEEN APPROVED BY THE DEPARTMENT OF MOTOR VEHICLES. STUDENTS MUST COMPLETE AND PASS THE WRITTEN TEST AND DRIVE ROUTE REQUIREMENT THAT WILL BE DISCUSSED DURING THE CLASSROOM PHASE. (The class is limited to 22 students with Cozad students getting primary registration opportunity until May 1. After May 1<sup>st</sup> open registration will be allowed until May 8 for remaining slots. This is a first come first serve opportunity).

**TO REGISTER:** Complete and cut off the bottom portion of this sheet and return to the Cozad Community Schools District office by **May 1<sup>st</sup>**. Your non-refundable class fee is due at the time of registration. If you are mailing your registration, please send to the address listed below.

**PAYMENT:** A fee of **\$285.00** is due at the time of registration. Fees are non-refundable. (*Checks need made payable to Cozad Community Schools*)

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## COZAD COMMUNITY SCHOOLS DRIVER EDUCATION CONTRACT

I, \_\_\_\_\_, understand that \_\_\_\_\_  
*(Parent or guardian)* *(Student)*

must take 20 hours of classroom instruction, 5 hours of behind the wheel driving, and 5 hours of observation in the car to complete the course.

If \_\_\_\_\_ cannot fulfill this requirement, they will forfeit the cost  
*(Student)*  
(\$285.00) of the course.

Phone #: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Email: \_\_\_\_\_

Permit #: \_\_\_\_\_  
*(Learners Permit if already acquired)*

### **Remit Registration and Payment to:**

Cozad Community Schools  
Attn: Canda Montgomery  
1910 Meridian Avenue  
Cozad, NE 69130