

BHM Community Education Classroom Driver Education Winter 2024 - Registration Information

Register:

- Online **bhmschools.ce.eleyo.com** or complete the paper registration form attached.
- Online registration ends Wednesday, December 27 at 4 pm or when the class is full.
- After December 27, call Community Education at 763.682.8770 to see if space is still available.
- The registration form can be downloaded online **bhmschools.org/drivers-education** or picked up at the Buffalo High School office or at the Community Education office (M-F, 8 am-330 pm).

Fee: \$395 fee is for 30 hours of classroom instruction and 6 hours of behind-the-wheel instruction.

Class Size: Limited to 35 students.

Dates/Time: 2 days a week Tuesdays and Thursdays, 3:45-6:45 pm in room A107.
Instructor to be determined.

(TH) January 4
(T, TH) January 9, 11
(T, TH) January 16, 18
(T, TH) January 23, 25
(T, TH) January 30, February 1
(T) February 6

Make-Up Session: One make-up session is scheduled for **Thursday, February 8, 3:45-6:45 pm**, in room A107 at Buffalo High School. Tardies and/or absence from one class need to be made-up. Students needing more than 3-hours of make-up time will be withdrawn and the student will retake the full 30 hours of classroom instruction and pay the \$125 classroom fee. **Please check for schedule conflicts prior to registration.**

Parent and Teen Safety Presentation: Soon to be drivers and their parents can choose to attend a two-hour presentation as part of their Driver's Education training. The focus of the presentation is to educate the audience on the seriousness of teen driving, the real risk of teen crashes and what parents and teens can do to make things safer when new drivers are behind the wheel. **Fee is \$10. The student must pre-register at bhmschools.ce.eleyo.com or call 763.682.8770** (Dates are yet to be determined). Safe Communities of Wright County and Community Education will offer the presentation.

Written Knowledge Test:

- The DMV requires the parent/student to schedule an appointment for the Written Knowledge Test. To schedule at the Wright County Government Center in Buffalo, visit **co.wright.mn.us** and scroll down to **"Make an Appointment"**. To schedule at a different location, visit **drive.mn.gov** and select **"Appointments"**. A class completion **Blue Card** is needed to take the Written Knowledge Test.
- The **Blue Card** will be given to students at the last class if they completed the course work and are registered for behind-the-wheel with BHM Community Education. Students who are age 14 can choose to be given their Blue Card after the last class and keep it in a safe place until they turn age 15 or they can pick up their Blue Card at the Community Education office, 301 NE 2nd Ave Buffalo, M-F, 8 am-330 pm, when they turn age 15. **The student must be present to sign the Blue Card.**

BHM Community Education Classroom Policies Driver Education Program

- 1.) Suspended/truant students may not attend classroom instruction.
- 2.) Students must be in attendance for all 30 hours of classroom instruction (State Law for students under 18 years of age) and all classroom instruction must be completed/passed on or before the last day of class.
- 3.) Students who have tardies and/or absence from one class should plan to attend the scheduled make-up session. The first scheduled class must be attended.
- 4.) We offer one 3-hour make-up session. Students needing more than 3-hours of make-up time will be withdrawn and must repeat all thirty hours of the classroom instruction. **The classroom fee of \$125 is nonrefundable. An additional \$125 fee is required to repeat the classroom instruction.**
- 5.) Students who are absent from one class are expected to have the next class assignment done when returning to class as well as the assignment due on the day of the absence.
- 6.) Students should bring class materials (student folder, textbook, workbook, manual, black pen, pencil and highlighter) to every class session. If the Drive Right textbook is not returned, a \$95 replacement fee will be invoiced to the parent.
- 7.) Students with some or all of the assignment not done when corrected with class will be scored as incorrect.
- 8.) Students cannot use electronic devices during class.
- 9.) Food or drink, other than water, is not allowed in the classroom or on carpeted areas.
- 10.) There is **ZERO TOLERANCE** for students with a chemical violation or unlawful action during classroom instruction. Students will be dropped from classroom instruction without a refund.
- 11.) Students should adhere to school campus rules.
- 12.) Please help keep the room, hallways and lavatories clean.
- 13.) The need for disciplinary action could result in expulsion from the Drivers Education program.
- 14.) Students should demonstrate a positive and serious attitude for this rigorous classroom instruction.
- 15.) Students must meet all requirements to pass the classroom instruction.
- 16.) Students should leave the building within 15 minutes after class.

M.S.171.04, subd. 1: The Department of Motor Vehicle shall not issue a driver's license to any person who is under the age of 18 years unless the person had applied for, been issued, and possessed the appropriate instruction permit *for a minimum of six months*.

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Questions, call Community Education, 763.682.8770, or email kcarlson@bhmschools.org

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**Please PRINT Clearly – Return form to BHM Community Education  
301 2<sup>nd</sup> Ave NE, Buffalo, MN 55313**

**Class WDE24  
(Jan-Feb)**

Student's Legal Name (PRINT) \_\_\_\_\_  
First Middle Last

School attending: \_\_\_\_\_ Grade this school year \_\_\_\_\_ (2023-24)

Date of Birth (M/D/Y) \_\_\_\_/\_\_\_\_/\_\_\_\_ Home Phone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip

Parent Email Address: \_\_\_\_\_

Parent/Guardian(s): \_\_\_\_\_  
Name Cell Phone

Parent/Guardian(s): \_\_\_\_\_  
Name Cell Phone

**Please respond to the following question:**

Is there any medical condition that may impair the student's ability to safely operate a motor vehicle?

No \_\_\_\_\_ If YES, explain: \_\_\_\_\_  
\_\_\_\_\_

**Payment:** Check # \_\_\_\_\_ Cash \_\_\_\_\_

Card # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date \_\_\_\_\_