

# **BHM Community Education Classroom Driver Education**

## **Fall A 2019 - Registration Information** (Page 1)

### **Register:**

- **Online** [bhmschools.ce.eleyo.com](http://bhmschools.ce.eleyo.com)
- **Complete the paper registration form**
- **In-person** at Community Education, 301 NE 2nd Ave, Buffalo, MN 55313
- *Classes fill quickly, so register early!*
- Online registration ends September 9 at noon or when the class is full

### **Registration Forms:**

Forms can be downloaded online **[bhmschools.org/drivers-education](http://bhmschools.org/drivers-education)** or picked up at the Buffalo High School office or the Community Education office. Online registration is the fastest and easiest way to register!

**Fee:** Provide credit card info or check payable to Community Education.

\$360 is for 30 hours of classroom instruction **and** 6 hours of behind-the-wheel instruction

**Class Size:** Maximum 35 students

### **Class Dates and Times:**

- Fall A classes are held 3:35–6:35 pm in **Room D106 at Buffalo High School with Mr. Holtz**
- A total of 30 hours must be completed and passed ***on or before the last day of class***
- *Instructor may announce changes if he/she has a need to revise scheduled dates/times*

(Tue) September 10	3:35 – 6:35 pm	(Thur) September 12	3:35 – 6:35 pm
(Tue) September 17	3:35 – 6:35 pm	(Thur) September 19	3:35 – 6:35 pm
(Tue) September 24	3:35 – 6:35 pm	(Thur) September 26	3:35 – 6:35 pm
(Tue) October 1	3:35 – 6:35 pm	(Thur) October 3	3:35 – 6:35 pm
(Tue) October 8	3:35 – 6:35 pm	(Thur) October 10	3:35 – 6:35 pm

### **Parent and Student Safety Meeting:**

Will be held **Thursday, September 19, 6:35-8:35 pm at Buffalo High School in Room D106**. Safe Communities of Wright County and Driver Education staff jointly conduct the class. We strongly encourage a parent or guardian attend this informative meeting with their son/daughter.

**Attendance:** 100% attendance and promptness are expected.

### **Make-Up Session:**

One make-up session is scheduled for **Friday, October 11, 3:35 – 6:35 pm, in Room D106 at Buffalo High School**. Tardies and/or absence from one class needs to be made-up (**September 10 class must be attended**). Students needing more than 3-hours of make-up time will be withdrawn and the student will need to REPEAT ALL THIRTY HOURS of the classroom instruction. **The classroom portion of the fee, \$110, and any late registration fee are nonrefundable.** An additional \$110 fee is required to repeat the classroom instruction. **Check for schedule conflicts prior to registering.**

### **Instruction Permit Test:**

The MN Department of Public Safety will be at Buffalo High School (Room D106) **Monday, October 14, 2019 at 3:35 pm** to administer the written instruction permit for those students who are 15 years old by October 14, 2019 **and** successfully met all requirements of the Fall A classroom instruction by the end of class. 14-year-olds will take the written instruction permit at a exam station when they turn age 15.

**Further Questions:** Call Community Ed, 763.682.8770, or email Kim Carlson [kcarlson@bhmschools.org](mailto:kcarlson@bhmschools.org).

**BHM Community Education Classroom Driver Education**  
**Fall A 2019 – Registration Form (Page 2)**

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**Fee (must be received with registration):** *Provide credit card info or check payable to Community Education.*  
\$360 is for 30 hours of classroom instruction **and** 6 hours of behind-the-wheel instruction.

**Class Size:** Maximum 35 students.

**FYI:** On the day of the written test for the instruction permit on **Monday, October 14 at 3:35 pm**, each student needs to bring their certified birth certificate, current school photo identification card (or original signed social security card), and a check **payable to Wright County Auditor-Treasurer**.

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

**Class FDE19A**

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

School attending: \_\_\_\_\_ Grade this school year \_\_\_\_\_ (2019-20)

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

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

Most Common Parent Email Address: \_\_\_\_\_

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

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

**In regards to this student:**

Any medical condition that may impair their ability to safely operate a motor vehicle? Yes \_\_\_\_\_ No \_\_\_\_\_

If YES, explain: \_\_\_\_\_

**\*I am aware of the Parent/Student Safety meeting September 19 at 6:35 pm** Parent Initials: \_\_\_\_\_

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

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