

**VIRGINIA DEPARTMENT OF EDUCATION
2002-2003 APPLICATION FOR DRIVER EDUCATION PROGRAM APPROVAL**

Division: _____ School: _____

Phone: () _____ Fax: () _____

I. Please list all classroom and in-car driver education teachers. Place an asterisk* adjacent to paraprofessionals' names. In the first column, use a "C" to designate teachers who teach classroom only; an "I" if they teach in-car only; or a "B" if they teach both classroom and in-car instruction.

C-I-B	Last	First	Middle	Social Security #	Date and Location of Endorsement Coursework	Date and Location of Curriculum Training

II. I certify the proposed driver education program meets all requirements for a state-approved program as specified in the 2001 Curriculum and Administrative Guide for Driver Education in Virginia. I understand only teachers with a valid Virginia teaching license and an endorsement in driver education may deliver classroom and in-car instruction. Approved paraprofessionals may conduct in-car instruction when supervised by properly endorsed staff. I understand that students who have received instruction from a teacher without proper endorsement will not be eligible for a Virginia driver's license.

Principal / Headmaster Signature Date E-Mail Address

Division Superintendent or Designee Signature Date

This program approval form must be submitted prior to offering driver education instruction during the 2002-2003 school year. Please return to: Vanessa C. Wigand, specialist, health, physical education, and driver education, Virginia Department of Education, PO Box 2120, Richmond, Virginia, 23218-2120; or fax to (804) 786-1597.