Attachment A to Adm. Supts. Memo No. 32

VIRGINIA DEPARTMENT OF EDUCATION
2004-2005 APPLICATION FOR DRIVER EDUCATION PROGRAM APPROVAL

Division: _____ School: _____

Phone: ( ) _____ FAX: ( ) _____

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 classroom only teachers; an "I" if they teach in-car only; or a "B" if they teach both classroom and in-car instruction. In the fourth and fifth columns, place the date and college/university where they successfully completed the two driver education endorsement courses.

C-I-B	Last First Middle	Social Security Number	Date and Location of Endorsement Course	Date and Location of Endorsement Course

I certify the proposed driver education program meets all requirements for a state-approved program as specified by the Code of Virginia and in the 2001 Curriculum and Administration Guide for Driver Education in Virginia. I understand that 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 receive 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

Please return this form by August 6, 2004, 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.