SCPS After School Driver Education Course

This program is a collaborative effort between Seminole County Public Schools, Seminole County Board of County Commissioners, METROPLAN Orlando, the City of Altamonte Springs, the City of Longwood, the City of Sanford and the City of Winter Springs. The course includes classroom instruction, range driving and on the road driving.

**When:** January 22-May 9, 2019. This is a semester course. Classes meet on either Mondays and Wednesdays at Lyman High OR Tuesdays and Thursdays at Seminole and Winter Springs High from 3:15 - 5:15 PM.

**Where:** Lyman High School, Seminole High School and Winter Springs High School however, the course is open to all SCPS students.

**Requirements:** Students must be 15 years old with a valid Florida Learner’s permit to register for the course. Students are required to have their driver’s license and student ID on them at all times.

**Conduct:** SCPS Code of Conduct and Zero Tolerance Policy will be in effect for this program. Students not adhering to these policies will be dismissed from the program. All discipline consequences enforced at the student’s home school will carry over to this program.

**Cost:** Free

**Transportation:** Not provided.

**Student Capacity:** Limited to 30 students per school per semester

**Registration Deadline:** January 14, 2019

**Registration information:** Students must complete an application and submit it to their home school by the registration deadline of January 14, 2019. You will be contacted via e-mail from the address listed on the application.

**Course:** This course will include classroom instruction, range and road driving.

**Attendance:** Attendance is mandatory. Please note – this is a semester course and it may conflict with extracurricular activities.

**Credit:** .5 credit will be awarded to those students that successfully complete the course. Students that wish to take the course for Pass/Fail must indicate this on the application.

**Instructors:** All instructors will meet the DOE requirements to teach driver education or have comparable certification through law enforcement.

For more information, contact Mary Lane @407 320-0192 or mary_lane@scps.k12.fl.us
# After School Driver Education

**STUDENT APPLICATION**

<table>
<thead>
<tr>
<th>After School Site</th>
<th>Lyman</th>
<th>Seminole</th>
<th>Winter Springs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Select One</td>
<td>M/W</td>
<td>T/TH</td>
<td>T/TH</td>
</tr>
</tbody>
</table>

**After School Site:**
- Select one of the following sites:
  - Lyman
  - Seminole
  - Winter Springs

**M/W**
**T/TH**

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### After School Driver Education

**Name of Student**: ____________________________________________________________

**Date of Birth**: _________

**Last** | **First** | **MI**
---|---|---

**Florida Student Number**: ________________________________

**Grade**: _________

**Name of Parent/Guardian**: ________________________________________________

**Address**: ________________________________________________________________

**Cell Phone**: __________

**Email Address**: __________________________________________________________

**Name of current school**: __________________________

**Please indicate if the student has an IEP**: __________

**504 Plan**: __________

**Florida Learner’s License #**: ________________________________

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**Students MUST have a valid Florida Learner’s License on the first day of the After School program.**

Upon successful completion of the course, students receive .5 high school credit. Indicate below if you are requesting to take the course with the Pass/Fail grading option. This must be done on or prior to the first day of the course.

**Pass/Fail**: __________

**Course Dates**: January 22- May 9, 2019

This form must be turned in to the guidance office at your home school no later than January 14, 2019

This is a **semester course**. Please note that enrollment in this course may conflict with extracurricular activities. **No absences are allowed.**

**Emergency Contacts:**

**Name**: ____________________________  **Relationship**: ________________  **Phone**: ________________

**Name**: ____________________________  **Relationship**: ________________  **Phone**: ________________

**Signature of Approval**: ____________________________

(Parent/Guardian)

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**Transportation is not provided.**

**For school use - Date received**: ____________________________  (Green Stock)