



## Off-Site Testing March 2010

Student's Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

**Please mail this completed form to us with the appropriate payment:**

- ✓ If the test taker is enrolled in our full teen course (30 hours of classroom & 8 hours of on-road instruction) you will need a \$90 check made out to High Ridge Driving School. On the memo line please put applicant's name. Note - fees are non-refundable.
- ✓ If the test taker is not enrolled in our full teen course (including 8 hour class only students) a check for \$260 (includes the mandated two hours of lessons) made out to High Ridge Driving School – on the memo line put the applicant's name. Note - fees are non-refundable.
- ✓ If you are taking the test for a second time you will need a \$90 check made out to High Ridge Driving School & a \$40 check made out to DMV. On the memo line please put applicant's name. Note - fees are non-refundable.

Note: It is your responsibility to ensure that you finish your required training and have held your permit for the mandated time period; no refunds are issued for failure to properly complete your training.

To be able to take the test on the above date an applicant must do the following:

- Turn in the completed paperwork to HRDS: **At the time and date marked on our web site.** You can turn your paperwork in early, during office hours (Mon-Fri 11:00am to 1:00pm & 3:00pm to 5:00pm). Note that availability is first-come/first-served.
- **You must be committed to completing the entire course prior to the test date and have held a permit for the appropriate amount of time.**

We have the two forms (R-229 & Parental Consent) you need to complete in our office, please use the paperwork checklist (available on our web site) to insure you bring everything we will need. **All paperwork must be submitted together and complete.**

Please sign this document stating you agree with the terms and mail this form to us. **Note you will need to go to the Norwalk DMV and take the Final Exam and pay a licensing fee after you successfully complete all the testing.**

_____	_____
Name	Date
_____	_____
Parent (if applicant is under 18)	Date