West Central Michigan Driver Education Student Contract, Segment II

www.wcmde.com

Office Hours: Monday – Friday, 9am - 5pm			Dept of State Certification # P000130		
Owner/Insti		All correspondence goes to: MDE - 17603 21 Mile Road - Big Rapid	ds, Michigan 49307 - pl	none (231) 796-0864	
Classroom	locations: □ Crossroad	ds Charter Academy, 215 W. Spruce St.,	, Big Rapids P rogra	m Number:	
(cho	oose one) 🗆 St. Micha	ael's Elementary School, M-20, Remus	s (8944 50 th Ave)		
Please Prin	ıt:				
> Student Na	me: Last First	Middle	/ /20 Date of Birth	() Student Phone #	
> Student Ado	dress		,		
Parent/s or Legal Guardian Name/s (and address if different from student)			Paren	Parent Cell and/or Work Phone	
		COURSE P	ROVISIONS		
		Education will provide a minimum of 6 lall not exceed 2 hours per day.	hours of classroom instru	action provided by a certified instructor.	
۷.		3. REQUIRED DEPARTMEN	T OF STATE INFORM	<u> MATION</u>	
For a stude	ent to take part in Seg		that the student has co	mpleted a minimum of 30 hours of driving I license, which has been issued for not less	
			<u>RMS</u>		
ch 2. To replace 3. The requ	neck, money order, or one can lost or damaged Securized score to pass the Security score to pa		or and pay a replacement ave 3 attempts to pass the	e test.	
		REFUND	POLICY		
1. 2.	If for any reason you decide to withdraw from the course before its completion, your payment will be returned or refunded.				
3.	Student Si	gnature	Parent//Guardian S	ignature	
	Provider Owner/ De	esignated Rep	Date of Co	ontract	
		*********	*******	*	
		he above named student, I certify this s) behind-the-wheel, in supervised dri		he minimum requirement of 30 hours or more Learners License.	
	Parent/Guard	lian Signature	Date		
REV 4/2	016				