

Classroom & In-Car Instructions

Instructor Copy

Temp #:	Issue Date:				Validation Date:			
Class #	1	2	3	4	5	6	7	8
Clock Hours								
Date								
Start Time								
Break Time								
End Time								
Student								
Instructor								

FINAL ANSWER SHEET

1	T	F	6	A	B	C	11	T	F	16	A	B	C	21	T	F
2	T	F	7	A	B	C	12	T	F	17	A	B	C	22	T	F
3	T	F	8	A	B	C	13	T	F	18	A	B	C	23	T	F
4	T	F	9	A	B	C	14	T	F	19	A	B	C	24	T	F
5	T	F	10	A	B	C	15	T	F	20	A	B	C	25	T	F
26	A	B	C	31	T	F	36			41	T	F				
27	A	B	C	32	T	F	37			42	T	F				
28	A	B	C	33	T	F	38			43	T	F				
29	A	B	C	34	T	F	39			44	T	F				
30	A	B	C	35	T	F	40			45	T	F				

46	
47	
48	
49	
50	

Test Score

x _____
 Student Date

 x _____
 Instructor Date

In Car Instruction: 1 - Improvement Needed 2 - Beginning 3 - Progressing 4 - Competent 5 - Exemplary

Lesson Number	1	2	3	4	5	Comments
Date						
Start Time						
End Time						
Break Time (if over two hours)						
Hours Driven						
Check for Valid Temp (check box)						
Entry Level Tasks (pre-drive/start/stop)						
Minimal Traffic, Intersections						
Moderate Traffic						
Use of Mirrors						
Vehicle Spacing						
Lane Changing						
RR Crossing						
Country Roads						
Night Driving (when possible)						
Sight Distance, Planning, Higher Speeds						
Backing/Parking						
Maneuverability (Parallel Parking)						
Expressway/Controlled Access Highway						
Instructor Number/Initials						
Student						

We, the undersigned instructors, certify that the student has satisfactorily completed the classroom and driving instruction required by Rule 4501-7-09 of the Administrative Code, and 4508.02 C of the Ohio Revised Code.

x _____
 Classroom Instructor

x _____
 In-Car Instructor