

CLASS DATE: ____/____/____ PERMIT # _____
SCHOOL _____ ID. _____
CERTIFICATE# _____ DATE: _____

OFFICE USE: TYPE OF PAYMENT/DATE/RECVD BY/ RECIEPT #/ OWES?

* _____/_____/_____
LAST NAME^ FIRST NAME (NOMBRE) DOB (FECHA DE NACIMIENTO) STUDENT'S PHONE #

* _____/_____/_____
ADDRESS CITY ZIP (DOMICILIO) EMERGENCY CONTACT NAME AND PHONE # (# DE EMERGENCIA)

ABC GUIDELINES FOR LIVE VIRTUAL DRIVERS ED CLASSROOM

PARENTS AND STUDENTS: The following policies must be read, signed and returned. Failure to do so will result in ABC-TE Holding on to permit referral card and/or certificate.

GRADUATED LICENSING PROGRAM: Any student that enrolls in any class must be 14 and 11 ½ months or older. The student Can not and will not receive a REFERRAL CARD until the student turns 15.

CLASSROOM AND DRIVING: ABC-TE will provide 56 hours of classroom VIA LIVE VIRTUAL TRAINING. Students dropping out or missing 2 or more days must provide a signed document stating why they will be absent and when they will make up those hours missed. No certificate of completion will be issued until the following have been met:

- All classroom has been completed; Final exam has been received and passed; Textbook must be returned.

During the Live Virtual Classroom, students are to participate during lectures and quizzes. Attendance will be taken at beginning of class, after break, and at the end of class. A notebook shall be kept of key notes for each chapter of the textbook. No inappropriate content or foul language should be used on the classroom screen or on the chat room for ABC classroom. Each student shall make sure he or she has proper bandwidth in order to join the Live Virtual Classroom for ABC. Students must have a functional smart device with microphone and camera. Privacy is of upmost importance, no videos or pictures shall be taken of instructor or other students so as to be passed around in social media or any other forms of communication.

PLEASE NOTE THIS IS A WEB-BASED TRAINING CLASS ON "ZOOM" DUE TO the current CDC STAY AT HOME ORDER and STATE MANDATED RESTRICTIONS. PLEASE NOTE: THERE WILL BE NO REFUNDS

- Questions or comments should be addressed to LORENA ROBERTSON 505-986-0278.

I, as the student, will comply with the Policies and Procedures of ABC TE School of Driving and the Driving Rules and Regulations of the State of New Mexico. I, as the student's parent/guardian, also understand and will comply with the same Policies and Procedures.

_____ Parent's Name _____ Student's Name

_____ Parent's Signature _____ Student's Signature

FOR OFFICE USE: REFERRAL CARD# _____ ISSUED ON _____ STUDENT INITIALS _____
CERTIFICATE# _____ ISSUED ON _____ STUDENT INITIALS _____

I _____ will be absent on _____ Reason: _____

I will make missed days up on _____ Completed _____

Parent Initials: _____ Student Initials: _____ Instructor Initials: _____