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|  | Texas Workforce Commission  Youth Driver Education Funding Program  TWC Application |

# Application Date: Click or tap to enter a date.

## Applicant Information

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| First and Middle Name | Click or tap here to enter text. | Last Name | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text. | | |
| **City, State, ZIP** | Click or tap here to enter text. | | |
| **Phone** | Click or tap here to enter text. | **Email Address (You must be able to access this email)** | Click or tap here to enter text. |
| **Date of Birth** | Click or tap to enter a date. | Name of Adult Who Can Contact You (in case we cannot reach you): | |
| **Phone Number of Adult Who Can Contact You (in case we cannot reach you)** | Click or tap here to enter text. | **Email of Adult Who Can Contact You (in case we cannot reach you)** | Click or tap here to enter text. |

## Driver Education School Information

Note to Applicant: Please register if the driver education school allows you to register without making a payment. Do NOT register, if the driver education school requires you to make a prepayment.

**\*\*DO NOT make any prepayments to the driver education school\*\***

**Please enter the following information for the driver education school you have selected:**

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| **Name of Driver Education School** | Click or tap here to enter text. | **Phone Number** | Click or tap here to enter text. |
| **Address** | Click or tap here to enter text.  Click or tap here to enter text. | | |
| **Email Address of Driving School** | Click or tap here to enter text. | **Website** | Click or tap here to enter text. |
| **Contact Person at the school:** | Click or tap here to enter text. | **Have you registered?** | Choose an item. |
| **Drivers Education Start Date Requested** | Click or tap to enter a date. | **Is the class online or in person?** | Online  In Person |

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| **Applicant Name:** | Click or tap here to enter text. |

**Complete if under 18 years of age**

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| **What type of driver education are you requesting? (Check all that apply)** | 32 Hour Teen Course  14 Hour Behind the Wheel Training  Both  Other (Type here):Click or tap here to enter text. | |
| **If under 18, Do you have a licensed adult 21 years of age or older that can supervise the additional required 30 hours of behind-the-wheel practice?** | | Choose an item. |
| **Please enter name of adult 21 years of age or older that will supervise your additional 30 hours of behind-the wheel.** | | Click or tap here to enter text. |

**Complete if 18 years of age and over**

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| **Do you need extra behind the wheel training to be prepared for the driving test?** | Choose an item. |
| **What type of driver education are you requesting?** | 6-Hour Adult Course  Extra Behind the Wheel Training  Both of the above  Other (Type Here):Click or tap here to enter text. |
| **If taking the 6-Hour Adult Course, is it in person or online?** | In Person  Online |
| **If Requesting Behind the Wheel Training, how many hours do you need?** | **Type number of hours here**(Behind the Wheel Training):Click or tap here to enter text. |

**Testing**

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| **Where will you take the driving test?** | Choose an item. |
| **Will you have access to a car for the driving test?** | Choose an item. | **r a minimum of 6 months?** | Choose an item. |
| **If under 18, have you held your Texas Learners License for a minimum of 6 months?** | Choose an item. |
| **Do you have a certificate from the DPS Impact Texas Teen or Adult Drivers video dated within 90 days of the driving test?** | Choose an item. |

**Total Estimated Cost Amount**

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| **Teen or Adult Driver Education Class** | Click or tap here to enter text. |
| **Behind the Wheel Training** | Click or tap here to enter text. |
| **Driver Test** | Click or tap here to enter text. |
| **Other Costs (Please ask the school staff what other costs will be required to complete your driver education)** | Click or tap here to enter text. |

**Note:** Applicants can apply for the either a Teen or Adult Driver Education Class only and then later submit a new application to request for behind-the-wheel training and driver test fee. Please refer to the Application Instructions to complete your application and eligibility forms.

**Please Be Aware:** This program will not pay for fees that the driver school may charge for late arrivals to classes or training/lessons, missed classes or training/lessons, and other fees the school may charge for not finishing a driver education program within a certain time frame.

Please attach documentation of costs entered in the above table: for example, a screen shot from the school’s website, or an invoice/letter provided by the driver education school.

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| **By signing below, I hereby certify that the information provided in this form true and correct to the best of my knowledge.** | |
| Signature:  X | Date: |

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| **FOR TWC USE ONLY** | | | | | |
| **Applicant UID #** | **Vendor #** | **Applicant Approval Date** | **Applicant Notification Date** | **School Notification Date** | **Date of School Registration** |
| Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |